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ABSTRACT

The purpose of this study was to establish a population profile of the skid row alcoholic in Houston, Texas and also to compare his demographic and drinking patterns with those of similar groups described in earlier studies made in other cities. Primary data sources for the study were interviews with 100 skid row alcoholics and with police and court officials and other persons involved with the problem. Secondary data were researched from the literature and published statistics. Evaluation of the survey results indicated that the typical skid row alcoholic in Houston resembled his counterpart in other areas of the country. Life styles and histories in the subculture are detailed and a demographic profile of the typical alcoholic is derived. Sample questionnaires and tabulated data are appended. (MF)

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A DESCRIPTIVE STUDY OF THE SKID ROW ALCOHOLIC IN HOUSTON, TEXAS

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A DESCRIPTIVE STUDY OF THE SKID ROW ALCOHOLIC IN HOUSTON, TEXAS

by

Tommy W. Ross

A THESIS

Approved:

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Dean of the Graduate School

A DESCRIPTIVE STUDY OF THE SKID ROW ALCOHOLIC IN HOUSTON, TEXAS

A Thesis

Presented to

The Faculty of the Department of Sociology

Sam Houston State University

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

---

by

Tommy W. Ross

January 1970

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Appreciation and gratitude is also extended to each member of my study sample who trusted me enough to share portions of their life experience of which they were not always proud.

ABSTRACT

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Purpose

The purpose of this study was to establish a population profile of the skid row alcoholic in Houston, Texas. It was designed also to point up differences, if any, in the demographic and drinking pattern characteristics between a sample of skid row alcoholics in Houston, and those described in earlier, but similar, studies completed in New Haven, Connecticut in 1945 and 1946, San Francisco, California in 1966, and Los Angeles, California in 1967. Specifically, the aim of the study was to provide those interested in the problem of alcoholism in general, and the rehabilitation and/or resocialization of the skid row alcoholic in particular, research information that might assist them in the furtherance of their efforts and endeavors.

Methods

The primary sources of data for this study were the responses of one hundred skid row alcoholics in Houston, to

a fifty-five item questionnaire used as a basis for the study and from interviews conducted with Police and Court officials as well as other business and professional persons directly involved with the problem of alcoholism on skid row. Secondary sources of information included books, articles, reports, previous research, agency statistics and records. The data were distributed by fifty-five descriptive data, and presented in tabular form by use of such descriptive statistics as ratios, proportions, and percentages.

Findings

From the data and other evidence gathered during this research the following conclusions may be drawn:

1. The "average" or "typical" skid row alcoholic in Houston, Texas basically resembles his counterpart in other sections and cities in the United States. A comparison of the results of this study with data developed in four earlier studies completed since 1946 shows that the population profile of the skid row alcoholic in the United States has changed little during that time.

2. The "average" or "typical" skid row alcoholic (N=100) is described by the following profile: he is 41.2 years of age, Caucasian, twice divorced and the father of two children. He started to drink prior to age 18 and had been arrested for drinking and suffered a "blackout" from drinking before he was 22 years of age. He had been fired for drinking before age 25 and he was a "morning-drinker" before age 30. He is extremely mobile, having been in Houston less than 12 months at time of interview and having moved five or more times since coming to the city. During the past 12 months he has been incarcerated four times for

public intoxication and at least once in the last 30 days. Although he was raised a Protestant he is not a church member at this time. He is a veteran of service in the armed forces.

3. The "typical" alcoholic in the study sample has always had difficulty in the area of significant relationships. His early and present relationship with his parents is described as "poor." His marriages ended in divorce and he has not seen his children in the recent past. Questionnaire responses indicate he never had a "close friend." The skid row subculture, where most relationships are shallow and transitory, is thus attractive to this type of individual.

4. Although the "average" alcoholic in this study had a "regular" trade or occupation at which he was capable of earning in excess of $3.00 per hour he had not worked at his trade during the past year. His only employment income in the recent past has been $1.60 per hour earned working for a temporary labor contractor or "Labor Pool." Inasmuch as his daily payroll checks were cashed, and most often spent immediately, at a "bar," he derived little lasting benefit from his labor. Comparative statistics reflect that the money lost each year due to not working according to capability cost each member of the study sample approximately $5,340.00 per year, or a total aggregate loss to the group in excess of one-half million dollars per year.

5. At the time of interview the drink of choice for the "average" subject in the study, was wine. He had started to drink wine "steadily" before he was 40 years of age and within the last six months, because it was the only alcohol available or the situation demanded it, he had resorted to drinking a "nonbeverage" alcohol such as canned-heat ("squeeze") or bay-rum ("bay-horse").

6. The "typical" alcoholic in the study has sought help with his drinking problem from the Salvation Army, a "Rescue Mission," Alcoholics Anonymous, and Medical and Mental Hospitals however the longest period of continued sobriety

he has known in the last several years has been of less than six months duration. This is partly due to his ambivalence wherein he has a desire to get well but he fears and resists treatment, where he has a desire to change but unconsciously fights against it.

Approved:

Dorothy D. Hayes

Supervising Professor

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CHAPTER I

INTRODUCTION

In the downward progression of the illness of alcoholism, the alcoholic, in most cases, reaches a point of surrender. He can surrender in one of three ways. Some surrender to treatment, and a few surrender to death by means of suicide. The third group surrenders to the illness itself. Seeing no way out of their dilemma they accept beverage alcohol as an integral part of their daily existence.

The illness of alcoholism is peculiar in the way it affects those most closely involved with the sick alcoholic. If a person has cancer, all are sorry for him and no one is angry or hurt. This attitude is not expressed toward the alcoholic illness, for it is usually accompanied by the annihilation of all the things worthwhile in life. It brings misunderstanding, fierce resentment, financial insecurity, disgusted friends and employers, warped lives of blameless children, sad wives, and broken-hearted parents. Close relationships, so necessary to most of us, are dissolved in alcohol and subsequently the alcoholic seeks alternate solutions to his problem of loneliness, to his need for human

contact and companionship. For some of the afflicted, skid row existence becomes a way of life. It is to these unfortunates that this effort is dedicated.

Statement of the Problem

The relationship of the chronic drunkenness offender and the skid row inhabitant, as well as the extent of the police problem with the drinking offender in general, was pointed up recently in a report of the President's Commission on Law Enforcement and Administration of Justice:

> In 1965 over two million arrests, one of every three arrests in America, were for the offense of public drunkenness. The great volume of these arrests places an extremely heavy load on the operations of the criminal justice system. It burdens police, clogs lower criminal courts and crowds penal institutions throughout the United States.
>
> The two million arrests for drunkenness in 1965 involved sporadic and regular drinkers. The offenders ranged from the rowdy college boy to the weekend drinker, from the drinking driver to the homeless, often unemployed single man. While it is not known how many of these arrests involved repeaters, there is strong evidence that a great majority of the repeaters live on "skid row," a dilapidated area found in most large and medium-size cities in the United States.[1]

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[1] The Challenge of Crime in a Free Society: A Report by the President's Commission on Law Enforcement and Administration of Justice, Washington, D. C., U. S. Government Printing Office, 1967, 141.

In Chicago, skid row is West Madison Street; in Los Angeles, Fifth Street off South Main. San Francisco has its Howard Street and in New York City, skid row is known as "the Bowery." The most notorious and supposedly the "toughest" skid row in America is Laramie Street in Denver, Colorado. In Houston, skid row is known as "the Avenue." It is an area two blocks wide and thirteen blocks in length, bounded on the west by Main Street, on the east by Dowling Street, on the north by Congress Avenue, and on the south by Preston Avenue.

Nationwide, from a physical standpoint, one skid row area bears a remarkable resemblance to any other, and the "Avenue" in Houston, Texas is no exception. Skid rows are known for their substandard hotels, cheap rooming houses, noisy taverns, pawn shops, used clothing stores, liquor stores that sell mostly wine, and small grocery stores that feature sardines, soda crackers, and canned beans. On every skid row, or in close proximity to it, will be found one or more rescue missions. At the very least, these offer the homeless population a bowl of soup, an opportunity to bathe, a change of clothes, and a place indoors to sleep. Through their nightly services to which attendance is mandatory if one desires to eat, rescue missions hold out promise of re-

lease, salvation, and a blissful hereafter. In recent years two new enterprises have changed the economy and perhaps prolonged the existence of the skid row area in many cities. These are the Blood Bank and the Labor Pool. If the individual is in reasonably good health and sober in the morning, quick money can be obtained from either of these sources on a day to day basis.

Except for those interested in lost property tax revenue or urban development, the vacant land and the half-used buildings on skid row are no problem. The problem is created by the type of individual that this area attracts. While not every member of the skid row population is an alcoholic, by far the greater proportion are, and the ones who do not have a drinking problem bring other personality defects with them. While no exact figures are available on the number of alcoholics on any skid row, Straus found, based upon a study done in New Haven, Connecticut in 1946, that 80 per cent of his study sample were excessive drinkers and 96.5 per cent drank to some degree.[1] In Houston, the police records point up the correlation between drinking and

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[1]Robert Straus, "Alcohol and the Homeless Man," Quarterly Journal of Studies on Alcohol, Volume 7, No. 4 (December 1946), 360-404.

skid row life. Police Department figures reflect that 75 per cent of all arrests for drunkenness in the city are made in the twenty-six block rectangle that makes up the skid row, or "Avenue" area.

Scientific investigation into the causation of alcoholism is a young discipline. As it matures, there is promise there will be a closer agreement between the apparent divergent theories that exist at present. Even now, if the commonalities are viewed rather than the contradictions, there are characteristics common to all the theories. Swerling and Rosenbaum summarize these:

> In general, the alcoholic is seen as having been rendered vulnerable, by early security-threatening experiences of deprivation, to addiction to a magical fluid which dispels tension and depression, relieves a sense of aloneness, places an instantaneous available source of pleasure at his disposal, permits the mastery and simultaneously the expression of unmanageable hostile feelings, and has the virtually built-in guaranteed array of sufferings and punishments, which serve both to appease the conscience mechanism and to feed back stress stimuli for continuing the cyclic addictive process.
>
> Learning theory and conditioned reflex formulations, on the other hand, seem to suggest that the pattern of anxiety, alcohol, relief from anxiety, is practiced repetitively and becomes highly over-learned. The reinforcement, which is the relief of anxiety, is immediate in contrast with the delayed reinforcement of other, alternative, adaptive maneuvers for handling the anxiety. The conditioned reflex, the drinking, progressively preempts the field of response for the widest range of stimuli. Finally, the conditioned reflex is essentially non-adaptive, and therefore, contributes to the perpetu-

ation of the anxiety, to which it has become a response.[1]

From the above it may be inferred that the alcoholic appears to be:

1. Estranged and isolated, without the capacity for close relationships.

2. Depressed with deep feelings of hopelessness, sadness, and futility.

3. Dependent to a marked degree upon external agents for security and care. Has an infantile orientation to others as providers of insatiable demands for love, acceptance, and comfort.

4. Hostile with patterns adaptation being marked by a sometimes overwhelming amount of chronic rage suffusing the entire personality.

5. Sexually immature in the sense of having problems with sexual identification.

6. Individuals who use alcohol as a coping device, not only against specific situational anxiety but also against the everyday stress and tension inherent in the culture.

The Neurotic syndrome set out above, with the exception of the last item involving alcohol, would also typify the individual who suffers from the patho-social condition of homelessness. The skid row alcoholic is sociologically classified as homeless and science has yet to ascertain

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[1] I. Swerling and M. Rosenbaum, "Alcoholism," in Silvano Ariesti (Editor), American Handbook of Psychiatry, Vol. I, New York, Basic Books, 1959, 627-628.

which condition precedes, the alcoholism or the homelessness. Straus found that heavy drinking preceded and seemed to be a contributing cause of homelessness in two-thirds of the men. Among the remaining third, heavy drinking followed and seemed to result from the condition of homelessness. He concludes: "Drinking seemed to be one of the several causes or one of the several results of homelessness."[1] From evidence at hand it seems that alcoholism and homelessness are in all probability two symptoms of the same personality problem and that both arise from the same causative factors. It is now an accepted conclusion that each condition tends to enhance the other. Clinebell points up the relationship when he writes:

> For the person whose ability to relate meaningfully to others has been impaired by early emotional deprivation, alcohol and homelessness are two ways of escaping the pressures of adult interpersonal demands. It is when living closely with others becomes unbearably painful that one retreats into homelessness, a life that demands almost nothing of the person. But homelessness removes not only the responsibilities but also the satisfactions of normal living. A homeless man, drifting and rootless, has almost no motivation for abstaining. The more he becomes divorced from normal life, the more he must resort to the pseudosatisfactions of alcohol. Thus a vicious spiral of homelessness and

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[1] Robert Straus, "Alcohol and the Homeless Man," Quarterly Journal of Studies on Alcohol, Volume 7, No. 4 (December 1946), 396.

alcoholism is established.[1]

Beyond the dual pathology outlined above, alcoholism and homelessness, the skid row alcoholic is also burdened with a stereotyped image. Stereotyping is insidious inasmuch as it robs the person of his individuality by definition. Other minority groups who for years have suffered as a result of being stereotyped, are now changing their public image through highly organized efforts. The skid row alcoholic has no spokesman to plead his case or a professional information agency to interpret his plight. Thus, the picture of the drunk asleep on the sidewalk persists in the minds of the general public whenever the skid row or homeless alcoholic is mentioned. Time has proven that an invidious image not only influences the public in a negative way attempting to acquire tax supported rehabilitation and/or resocialization programs, it also negatively affects the therapeutic community in the form of lowered optimism as to recovery possibilities.

The need for research has been seen both on the local and the federal level. In a study done at the request of

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[1]Howard J. Clinebell, Jr., Understanding and Counseling the Alcoholic, New York: Abingdon Press, 1958, 71.

the Corporation Court in Houston, in 1962, it was established that the cost to the city for the handling of the 11,100 drunkenness offenders who were sentenced to the City prison farm in 1961 amounted to approximately $1,276,500. The report went on to say that the majority of the drunkenness offenders sent to the prison farm were repeaters, caught up in the "revolving door" of arrest, jail, court sentence, prison farm and back again, and that a few of them had any understanding into the real nature of their problem.[1] In 1967 the report by the President's Commission on Law Enforcement, commenting on the fruitlessness of the "revolving door" methods, made the following recommendations concerning the treatment of the skid row alcoholic:

1. Communities should establish detoxification units as part of comprehensive treatment programs.

2. Communities should coordinate and extend aftercare resources, including supportive residential housing.

3. Research by private and governmental agencies into alcoholism, the problems of alcoholics, and methods of treatment, should be expanded.[2]

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[1] "Alcoholism Study as Related to the Homeless and Institutional Alcoholic in the Greater Houston Area," an Unpublished Report by the Houston Council on Alcoholism, 1962.

[2] The Challenge of Crime in a Free Society: A Report by the President's Commission on Law Enforcement and Administration of Justice, Washington, D.C., U. S. Government Printing Office, 1967, 146.

For many years, because it knew no other way, society has demanded the police handle the problem of the skid row alcoholic by treating him as a criminal.[1] The police, who have long known that this passive person was not a criminal except in the technical sense, have attempted to follow the dictates of society by arresting the skid row drinker whenever he was seen in some cities, and whenever he got cut of a certain prescribed area in other cities. From this arrest pattern has evolved the "revolving door" syndrome mentioned above. This expensive and unproductive method has persisted due to the lack of research which might lead to more effective programs.

Skid row is strictly an American phenomenon but only recently has science begun to study this section and its inhabitants. The existential school of thought believes it is fruitless to try and understand man separated from his "world," world being the structure of meaningful relationships in which a person exists and in the design of which he participates. Research and treatment people have found it extremely difficult to study the skid row alcoholic away from his environment as he tends to put on what they call the

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[1]Egon Bittner, "The Police on Skid Row," American Sociological Review, Vol. 32, No. 5 (October 1967), 712-715.

"treatment face," and data collected under these circumstances are suspect. Perhaps more research of the kind intended for this paper, research done in the environment where the subject lives, will help fill in some of the information gaps that exist at the present time about the skid row alcoholic.

The Purpose

The purpose of this study was to establish a population profile of the skid row alcoholic in Houston. The demographic characteristics and the drinking pattern characteristics of the subjects comprising this research sample were compared and contrasted with subjects interviewed and reported on in earlier, but similar studies, done in the same area of concentration.

In designing this study several basic questions were considered:

1. Who is the skid row alcoholic in Houston, and how does he exist?

2. What treatment facilities have been available to the skid row alcoholic in Houston? What are available now?

3. What is the present attitude of the Police toward the skid row alcoholic in Houston? In what way have recent court decisions affected their practices and procedures in the handling of the chronic drunkenness offender?

4. What is the attitude of the local skid row alcoholic toward proposed rehabilitation programs planned for this area?

It was expected that such a study would:

1. Confirm or deny the changing population profile of the skid row alcoholic.

2. Correct in part, or dispel in part, the stereotype image of the skid row alcoholic in the Houston area.

3. Reveal common etiological factors present in the life histories of the research sample thus delineating common problems encountered in attempting to assist these people.

4. Confirm that the problem of alcoholism on skid row is indeed a social problem in our society which exacts an enormous economic and human cost.

5. Provide sufficient material for the formulation of hypotheses for further, more explicit, research.

Method and Procedures

The population from which the study sample was drawn included all patients at a detoxification center located close to the skid row section. The patients at this center were skid row alcoholics who had to have help to withdraw from the effects of prolonged drinking. The "general" population of skid row in Houston was sampled also. These subjects were interviewed in "the Avenue" section. From long association with, and deep interest in, the skid row drinker in Houston, the author was able to interview with a certain degree of freedom. One-half of the study sample were interviewed while they were serving jail sentences at the City of Houston prison farm. All inmates interviewed were sentenced

for chronic drunkenness. All of the subjects interviewed were problem drinkers by their own admission. Throughout this paper the study sample is referred to as alcoholic because all have an extensive history of personal and social maladjustment involving alcohol. While such diagnostic imprecision is regrettable, the term "alcoholic" has sufficient meaning to warrant its use in this study.

As our source of primary data, interviews were conducted with each of the 100 individuals in the population sample. A fifty-five item questionnaire was used to structure each interview to insure that certain data were not overlooked.[1] In the majority of the interviews, the questionnaire served as a basis from which other information, which could not be recorded statistically, was obtained. The additional information was concerned with the subject's feelings about drinking, skid row, and life in general. Selltiz, et al. define a descriptive study as being an attempt to draw a picture of something in scientific terms.[2] Skid row however, is as much a state of mind as it is a place, and for this reason inquiry should go beyond facts

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[1] Appendix A. sample questionnaire, p. 109.

[2] Claire Selltiz, et al., Research Methods in Social Relations, New York: Holt, Rinehard and Winston, 1964, 65.

and figures. The data were distributed for analysis by fifty-five base line descriptive variables including two gross descriptive items, eleven interpersonal and marital relationship items, two peer relationship items, nineteen descriptive data items that refer to residence, mobility, employment and wages, and twenty items that question involvement with the police, drinking history and pattern, health, church affiliation, and prior military service.

Other primary sources of information included interviews with police and court officials as well as management personnel of business concerns which serve as sources of income to the skid row alcoholic. Local hospital and rehabilitation counselors were contacted regarding past, present, and future recovery programs involving the skid row drinker. The data were analyzed by use of such descriptive statistics as ratios, proportions, and percentages.

Research should have as its basis certain beginning assumptions based on previously acquired knowledge, which may or may not be true at this point in time. Often if previously acquired knowledge is true, it is either ignored or misused. The first assumption upon which this study rests illustrates both points. For the purposes of this study, it is assumed that due to their visibility and apparent common characteristics, a stereotype image of the skid row inhabi-

tant has been created in the minds of not only the general public, but also in the minds of some police personnel and those in the helping professions. A further assumption made was that it has been response to this stereotype image, and not to the facts as they are, that has allowed the present unproductive and outdated methods of treatment to continue. It is conjectured that this stereotype image must be either corrected or dispelled before effective treatment changes will occur.

Contrary to popular opinion, skid row is assumed to be more than just a section or area in the larger cities where male derelicts congregate with little if any interrelatedness to each other. It may be that living on skid row serves as a partial solution to the psychological and sociological problems suffered by the majority of the inhabitants of the area, and one of the realities that has been obscured is that skid row life is group centered and dominated by group norms, mores, and folkways. It is further assumed that these can be observed through systematic direct methods, and they can be described.

In Chapter I the problems that beset the skid row drinker or the chronic drunkenness offender were presented. These problems include alcoholism, homelessness, and an un-

realistic stereotype image. The purpose of the research, the procedures used to collect data, and the method of data analysis were mentioned also. In Chapter II a brief history of the skid row area in Houston, Texas is described, and a review of the pertinent reported research on the skid row alcoholic is given. The treatment facilities that have been available to the skid row alcoholic in Houston, Texas and the changing philosophy and focus in treatment are discussed in the latter part of Chapter II.

CHAPTER II

BACKGROUND OF THE STUDY

The term "skid row" had its beginning in the Pacific northwest when hard drinking lumberjacks, living in work shacks along Seattle's Yesler Way, a greased logging skid, nicknamed their community "Skid Road."[1] In the far western cities of the United States the term "skid road" is still used in preference to the now more popular and better known term, "skid row." It was the working man, seeking cheap shelter, who was responsible for the creation of skid row sections in other large cities in the nation. Chicago, Illinois, is a good example. In the late 19th century men filling temporary and seasonal jobs with the expanding railroads, shipping and industry, gathered on Madison Avenue to be near their work. A rough life style with heavy drinking and low expectations developed and from small beginnings the population grew until at one time it was estimated to be as many as 75,000.[2] Industry moved west but many of the men who came to "the Street," as the section came to be called,

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[1] "Cities," Time (February 28, 1969), 62.

[2] Houston Post, Sunday, March 2, 1969.

to seek their fortune, stayed on to drink and dream of what might have been. Their intention had been to make their "bundle" and leave. Few did.

History of the Area

In Houston the early skid row area was known as "Vinegar Hill." This hill was a large dirt mound on the banks of Buffalo Bayou at the end of Preston Avenue, west of Main Street. Around it grew up a shanty town where alcohol and cocaine were staples and murder was a common occurrence.[1] About the turn of the century, the Congress Avenue area, east of Main Street, began to deteriorate. Congress Avenue got its name because it bordered on a tract designated by the founding fathers of Texas as a site for the government of the Republic of Texas. Before construction could begin on the Capitol, private enterprise built a municipal market in the area and because of this activity the politicians decided, in 1837, to build the Capitol further uptown, at the corner of Main Street and Texas Avenue, where the Rice Hotel now stands. Congress Avenue did have its day of glory. From the days of the Republic until about 1910 it was the

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[1] Houston, a History and Guide, Compiled by the Workers of the Writers Program of the W. P. A. in the State of Texas, Austin, the Anson Jones Press, 1942.

downtown silk-stocking row. Fame and prestige are often fleeting things, even for a street, and it was only three decades later that Byrd, commenting on the Avenue, wrote:

> Nowadays Congress Avenue is mostly a double row of scrounging retail stores, flophouses, brothels, and honky-tonks; the heart of our home-grown skid row, peopled by a curious assortment of hard-bitten merchants, working men and women, wineheads, goofball addicts, desiccated trollops, and by some honest and respectable citizens.[1]

So for several years it might be said Houston had two skid rows, Congress Avenue and the shanty town known as Vinegar Hill. World War II forced the tearing down ot the tar-paper and tin shacks that was the community of Vinegar Hill and its residents moved up Preston Avenue to the Union Railroad station area, east of Main Street. Both Congress Avenue and Preston Avenue were in close proximity to the railroad yards. As in the eastern cities, this location contributed it attraction for the type of individuals who end up on skid row. Men would travel by railroad from the farms and the smaller cities seeking their fortune, and having little money and no knowledge of Houston they sought the cheapest and most handy accommodations. For those who brought personality problems (or "weakness," as it was known

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[1]Sig Byrd, Sig Byrd's Houston, New York, The Viking Press, 1955, 13.

in the past) with them, skid row, in Houston or elsewhere, often became their permanent residence.

Review of Pertinent Reported Research

Early writings bear out the previous statement that while not all the men who live on skid row are alcoholics, the majority of them are problem drinkers. Anderson stated that the only sober moments most hobos and tramps knew were when they were out of funds, and that practically all homeless men drank when liquor was available.[1] Early statistics and observations for the most part confirmed this observation. Solenberger reported that 47 percent of the homeless men seen in a Minneapolis shelter admitted that they drank to excess; however this fact must be evaluated with regard to the tendency of many men to lie about their drinking practices.[2] Laubach found that 54 of the 100 men he interviewed lied about drinking during their first interview but 83 finally said they were either "bad alcoholics," or "steady drinkers."[3] Sutherland and Locke reported that a large pro-

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[1] N. Anderson, The Hobo, Chicago, University of Chicago Press, 1923, 43.

[2] A. W. Solenberger, One Thousand Homeless Men, New York, Charities Publication Committee, 1911, 113.

[3] F. C. Laubach, Why There Are Vagrants, New York, Charities Publication Committee, 1916, 76.

portion of their research sample were burdened with mental disorders, uncontrolled emotions, and alcoholism.[1]

In the middle Forties increased emphasis was given to the existence of different segments in the problem drinking population. Research endeavors began to be concentrated on the subgrouping of the homeless skid row alcoholics, arrested and incarcerated inebriates, and public clinic patients. These subgroups were analyzed in terms of age, sex, marital status, nationality, race, educational achievement, occupation, and residental mobility.

In 1946, Straus, after interviewing 203 homeless men at the Social Service Center of the Salvation Army in New Haven, Connecticut, reported a population profile of his research sample.[2] He found that the typical homeless man left his parental home at an early age, often after the death of a parent or the divorce of his parents. Serious emotional conflict often existed between the child and his parents. Early emotional instability and deficient socialization were characteristic. Often he had never married or was widowed or divorced, often several times. He was constantly mobile,

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[1] E. H. Sutherland and H. J. Locke, Twenty Thousand Homeless Men, Chicago, University of Chicago Press, 1936, 48.

[2] Robert Straus, "Alcohol and the Homeless Man," Quarterly Journal of Studies on Alcohol, Vol. 7, No. 4 (December 1946), 360-404.

going from one skid row to another and he rarely stayed in one place more than a few weeks or months. His church affiliation was either Catholic or Protestant, almost never Jewish. At the time of the interview, most men spoke of their religion in the past tense. Many were unemployable, and while others worked at various unskilled or semiskilled jobs for part of the year, they were, for the most part, on the "bum." In his findings Straus concluded that undersocialization was the major problem faced by the homeless or skid row alcoholic. This condition was indicated by the skid row alcoholic's lack of participation in socially created and organized activities which would bring into contact with other individuals.

Deutscher supported Straus's undersocialization hypothesis when he wrote:

> Most of the men who live alone in the slums are alienated from people. Their common characteristic is their isolation, and even those who drink together and are frequently incarcerated together, are not friends, they only know each other.[1]

In a more recent article, Finlay, not only supported the undersocialization hypothesis, he built a theory around the

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[1]Irwin Deutscher, "The Petty Offender, a Sociological Alien," Journal of Criminal Law, Criminology, and Police Science, XLIV (1954), 592-95.

premise. In the article he contended that most alcoholics were driven to seek help for their illness by "role network pressure." To the author "role network pressure" referred to the strong influence that family, friends, employers, and other close associates of the alcoholic were able to bring to bear on the alcoholic to persuade him to seek help for his illness. Finlay believed that the skid row alcoholic had little if any impetus to "do something about his drinking" because there were no family, friends, et cetera left to exert "role network pressure" on him.[1]

In 1952 Jackson and Conner did a study which tended to refute the idea that skid row alcoholics were total isolates.[2] In their findings they identified their study sample as alcoholic and nonalcoholic residents. The nonalcoholic residents were dichotomized by: (1) permanent residents who had pensions or other sources of income and who did not drink, and (2) transients, who, while they drank heavily, were not alcoholics. The alcoholic group was divided into six segments, (1) the older alcoholic

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[1]Donald G. Finlay, "Effect of Role Network Pressure on an Alcoholic's Approach to Treatment," Social Work, Vol. 11, No. 4 (October 1964), 32-37.

[2]Joan K. Jackson and Ralph Conner, "The Skid Road Alcoholic," Quarterly Journal of Studies on Alcohol, Vol. 14, No. 3 (September 1953), 461-86.

(2) bums (3) "characters" (4) "winos" (5) "rubbydubs" and (6) the "lushes." Their paper concentrated on the "lush" group, which, according to the authors, were the prestige group of the alcoholic society. Unlike the "winos" who drank only wine, and the "rubbydubs" who drank nonbeverage alcohol, the "lushes" drank liquor most of the time and resorted to nonbeverage forms of alcohol only when desperate. The study was done on "skid road" in Seattle, Washington and the findings satisfactorily established that rather than being a solitary drinker or social isolate, the skid row alcoholic, at least in that area, sought a group or segment in the subculture that suited his personality, his drinking pattern, or his economic status.

Approximately six years later Peterson and Maxwell did a followup study, in the same geographical area, to determine whether or not the "wino" segment, of the "skid road" population, had social characteristics similar to the "lush" group. In their findings they described the "wino" way of life as follows:

> In his life on skid road, the wino has many associations with small groups of men. The associations, generally of three or four men, tend to be very informal and frequently of short duration, since their primary function is the procurement and consumption of wine. While an individual may have close friends in the same group as he, and even though some groups persist over a period of time, permanence is not a

> prevailing characteristic of these groups. The size and duration of a small group is often governed by the price of a bottle, the time it takes to raise this amount of money, and the time spent drinking it. But no matter how transitory the specific groups may be, almost all wine drinking is done in such groups, and groups tend to be formed within a range of acquaintances. Furthermore, the sense of obligation toward all wino companions with whom a man has associated, is great.[1]

Both studies supported the idea that skid row life was group centered, even to the extent that one group passed judgment on the other. In the original study the "lushes" looked down on the other drinking groups in the skid row society. In the followup study mention was made that the "winos" felt a strange pride in their lower state. To them all other drinkers on skid row were actually heavy "social" drinkers who were only on skid row temporarily.

In 1961 James F. Rooney reevaluated Straus's hypothesis, that the skid row alcoholic was undersocialized.[2] In his study he carefully detailed the structure and the function of the "bottle group," a fellowship which he stated, was spontaneous and temporary by nature. Its formation was

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[1] W. Jack Peterson and Milton A. Maxwell, "The Skid Road Wino," Social Problems, Vol. 5, No. 1 (Spring 1958), 308-16.

[2] James F. Rooney, "Group Pressures Among Skid Row Winos," The Quarterly Journal of Studies on Alcohol, Vol. 22, No. 3 (September 1961), 601-12.

based on common need, the need of several skid row alcoholics for a drink of wine. A bottle gang is usually started by a person whom the author called the "initiator." The initiator, at the time he begins to recruit other members of the prospective bottle gang, is the possessor of one-third to one-half the price of a bottle of wine. Moving down the sidewalk, he solicits other known members of the skid row population, asking if they would like to "go in on a bottle?" The solicitor or initiator has the obligation to inform each prospective partner of the amount of money collected and the number of men with whom he will have to share the wine. This information is given so the prospect may know the offer is genuine, that he is not being exploited to purchase wine for a group of destitute "promoters." If the prospect decides to participate, he hands his contribution to the solicitor. It is by the "handing over of the money," that the contributor becomes a contractual member of the group, and as such, is entitled to an equal proportion of the wine. Contributions of each member are not always equal, but the wine, within reason, is divided equally. The size of the group is decided by the price of the bottle and when the price has been raised, the group membership is closed.

After the solicitor has purchased the wine, the roles change. The initiator or solicitor becomes the "leader-host,"

and as such, has the right to pick the location where the bottle will be shared. Also, he has the right to regulate the consumption and conduct of his guests. The others in the group become "members," and as such have the responsibility of listening to the ego-boasting rationalizations of not only the leader-host, but also other members of the group. The bottle gang is not an on-going association with temporal continuity. The emptying of the bottle dissolves the group. Another group may be immediately formed, often with several members of the old group, but each group is started anew with each bottle.

The bottle gangs, or similar groups, have been reported on skid rows in other parts of the country. Straus and McCarthy found that 90 per cent of the alcoholics on the "Bowery" in New York City usually had drinking companions.[1] Bain, in his study, described two major types of skid row drinking groups in Chicago, tavern-centered groups, and street-drinking groups.[2] The tavern groups were composed of

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[1]Robert Straus and Raymond G. McCarthy, "Non-addictive Pathological Drinking Patterns of Homeless Men," The Quarterly Journal of Studies on Alcohol, Vol. 12, No. 4 (December 1951), 601-12.

[2]H. G. Bain, "A Sociological Analysis of the Chicago Skid-Row Lifeway," Master's Thesis (Unpublished), University of Chicago, 1950.

more regularly employed and hence fairly affluent persons, who formed relatively stable associational ties based on continued attendance at the same establishment. Less affluent members of the skid row population were forced to drink on the street. The street drinking group lacked the closeness that developed among the tavern drinkers, and street drinking groups were usually of short duration.

From the studies reported above, the conclusion may be drawn that while life on skid row is casual and permissive, it is not totally without structure, and limited group activity is common. The studies also reveal that group activity on skid row, limited as it might be, is centered around the drinking of alcohol in one form or another. This association can be witnessed by the fact that although the name may differ from skid row to skid row, the groups are segmented and named according to the type of alcohol the members drink. Even those on skid row who do not drink are set apart by that fact. It seems clear, that contrary to public opinion or impression, the skid row subculture exists on rules and rituals, mores and folkways, much like the larger society which it seeks to avoid.

Previous research in the field also raises an interesting question. Is the drinker on skid row an alcoholic

addict? Several authorities do not think so. Straus and McCarthy point out that the majority of skid row imbibers are capable of controlling their drinking within quite strict limits. Thus they are not properly alcohol addicts but rather nonaddictive, symptomatic, excessive drinkers, who seek a sense of removal and relief, but not complete escape, through alcohol.[1] Jellinek has defined the type of drinking done by most of the skid row population as a form of "non-addictive alcoholism," that serves to deaden the pain of underlying personality problems or harsh environmental conditions.[2] Bouge enlarged on this reasoning when he reported that many of his study sample were psychotics to whom steady drinking was a mechanism by which they relieved tension and thus avoided more extreme forms of acting-out behavior.[3] Travis believes much of the drinking on skid row is the undiscriminating man's way out of loneliness, fright,

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[1]Robert Straus and Raymond G. McCarthy, "Non-addictive Pathological Drinking Patterns of Homeless Men," The Quarterly Journal of Studies on Alcohol, Vol. 7, No. 4 (December 1951), 608.

[2]E. M. Jellinek, "Phases in the Drinking History of Alcoholics," The Quarterly Journal of Studies on Alcohol, Vol. 7, No. 2 (June 1946), 1-23.

[3]Donald J. Bouge, Skid Row in American Cities, Chicago, University of Chicago Press, 1963, 151.

and despair, and consequently, should not be considered alcohol addiction.[1]

Assuming that the above is true, that the skid row alcoholic seeks a level of drunkenness that deadens the pain of reality but does not render him helpless, then wine is the drink of choice to achieve this state. Newman and Abramson report, that wine, due to its high buffer quality, will bring to the drinker a sense of relief from loneliness and tension, but not oblivion.[2] For an alcoholic beverage to have a "high buffer" quality means that it will be absorbed into the blood stream more slowly, and as a result the blood-alcohol curve does not reach the high peak it would were the individual drinking "hard liquor." Once the wine drinker does reach a peak, the concentration does not decrease as rapidly and the effects are longer lasting. Skid row drinkers report that wine does not make you "high," but rather "dense," "dopey," or "numb." One of our study sample remarked: "To stay drunk on wine is to forever feel like you were blackjacked the day before yesterday!"

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[1] Georgia Travis, Chronic Disease and Disability, Los Angeles, University of California Press, 1961, 94.

[2] H. Newman and M. Abramson, "Absorption of Various Alcoholic Beverages," Science, 96 (1942), 43-44.

Treatment Facilities

For many years public facilities for dealing with chronic inebriety were limited to mental hospital, jails, and charitable shelters. When one begins to speak of actual "treatment" for the skid row alcoholic, first consideration must be given to the "Rescue Missions," and the Salvation Army. These institutions were on skid row, trying to help, five decades before the social scientists were showing any sustained interest in the area. Today these facilities are more active than ever and their approach to the problem of alcoholism has not changed appreciably since they began their "ministry" many years ago.

Both the Mission and the Salvation Army operate from the moralistic assumption that the alcoholic is completely responsible for his despicable condition. From this premise, they set about through their nightly services, to create an emotional crisis experience for those in attendance. Clinebell describes the meeting as a four stage psychological process that includes preparation, crisis, surrender-acceptance, and consolidation.[1] The preparation begins with

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[1] Howard J. Clinebell, Jr., Understanding and Counseling the Alcoholic, New York, Abingdon Press, 1958, 73.

group singing which establishes a sense of groupness. After the "singing," personal testimonies, a powerful form of preparation, are given. The testifiers describe themselves as members of the skid row population and tell of their sins and degradation. They then share with the audience their "conversion experience," or how they were "saved," by answering the altar call. Besides creating a mood of positive suggestion, the testimonies help the listener to identify with the speaker and perhaps gain a glimmer of hope that "maybe I can do it too."

After the "testimonies," the mission evangelist preaches. He makes a direct attack on the heretofore anesthetized emotions of fear and guilt of the unconverted alcoholic in the pew. He makes frequent mention of home, mother, and manhood, coupled with threats of eternal hell and damnation, and it is by stimulation of guilt and fear, under the influence of group emotion, that the evangelist is able, in some cases, to crack the defensive alibi system of the individual. When this happens the person is exposed to his real feelings of self-disgust, and he is made to feel as miserable, hopeless, and helpless as possible. Aided by the effects of prolonged drinking, the mission technique has created an emotional crisis or a "bottom" to which the skid

row alcoholic can respond. For the mission clientele this is a valid approach, for this group is composed largely of men, who, for the most part, have used up their "bottoms" without ever receiving help.

At the moment of crisis, when all appears lost, the evangelist interjects a ray of hope into the proceedings. Although there is nothing the alcoholic sinner can do for himself, there is a Savior who cares. All a person has to do is to accept this Savior and salvation will be his. Straus has pointed out that effective therapy with the homeless alcoholic must offer substitute reward values for abstinence which are equivalent to the reward value of excessive drinking and which will require no more effort than drinking.[1] Salvation meets this test as it requires only a decision, and the rest is up to God. The proper decision carries with it not only acceptance and forgiveness but also the promise that the alcoholic will be taken care of. To the lonely, physically and emotionally starved alcoholic, this promise has great appeal.

If the alcoholic's response to the altar call has been sincere, and not just a "dive for Christ," to hurry the

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[1]Robert Straus, "Alcohol and the Homeless Man," The Quarterly Journal of Studies on Alcohol, Vol. 7, No. 4 (December 1946), 396.

mission's promised meal, the individual finds himself cut off from fellowship with his former drinking companions. The mission structure moves in to fill the void and to provide an environment in which the conversion experience may be consolidated. Food and shelter are provided and the convert is made to feel part of the "in-group" where he is both accepted and welcome. If the alcoholic remains sober and stays at the mission he soon learns the vocabulary and shifts from "helped," to "helper." He is given a job around the building and is asked to "testify" at the meetings from time to time. It was pointed out in Chapter I that part of the "alcoholic syndrome" is his great need to be cared for, and inasmuch as the essence of mission therapy is dependence on God and on the mission, one of the basic needs of the alcoholic is met by mission life. The new role as "mission helper" also provides a group approved outlet for unresolved hostilities and aggression as the convert can now turn these energies toward sin and sinners with vigor.

The program, clientele, philosophy, and dynamics of the Salvation Army are almost identical with those of the rescue mission. The program centers on the salvation meeting, which is almost indistinguishable from the gospel meeting described above. The program of physical aid and

rehabilitation is quite similar, and the dynamics of the conversion experience seems to be identical. Unlike the rescue mission, which is usually an isolated entity, the Social Service Center of the Salvation Army (or "Sallie" as it is known on skid row) is part of a network of installations which stretch across the nation. In recent years the Salvation Army has softened its moralistic stand on alcoholism and has begun to take an eclectic approach to the problem in which the resources of social work, psychiatry, medicine, and Alcoholics Anonymous have been integrated with their basic evangelism.

At the present time there are two large rescue missions and several smaller ones, available to the skid row alcoholic in Houston. The Salvation Army has a large social service center located in downtown Houston, as well as a smaller facility located just west of the downtown area. It is estimated that between the Missions and the Salvation Army, approximately 555 transients can be handled on a nightly basis. In the winter months when the "snow birds," transients who come south to avoid the cold weather, crowd into Houston, both the "Sallie" and the Missions can about double their capacity to sleep these men by putting bedrolls on the floor.

Seventy-seven per cent of the research sample reported they had stayed one time or another at either the Salvation Army or a Mission. The majority were ambivalent in their feelings toward both the "Sallie," and the Mission. Although they valued the security of both organizations, at the same time they felt hostility toward the authoritarianism demonstrated by each. The group feeling was summed up rather well by one subject who said: "Before they (the Mission or the "Sallie") will <u>really</u> help you, they demand a "life sentence" with no drinking, no smoking, and no hope for parole. You have to be "good" forever."

While none of the subjects in the research sample had found lasting sobirety through exposure to the evangelistic efforts of either the Mission or the Salvation Army, it should be remembered that by design only men who were still drinking or had recently abstained due to hospitalization or incarceration were interviewed. John McIntyre, the director of the oldest Rescue Mission in the Houston area, recently reported that approximately 10,000 dedications to Christ had taken place at the Star of Hope Mission in the last 10 years.[1] Since it is estimated that ninety per cent of the

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[1] <u>Houston Post</u>, Saturday, March 23, 1969.

transients who seek nightly shelter at the Star of Hope Mission are problem drinkers, it seems safe to assume that a portion of these do achieve long term sobriety through a conversion experience which began at the Mission. Many of the valuable services rendered by the Missions and the Salvation Army to the skid row alcoholic cannot be measured statistically. Three men included in the study sample reported their lives had been saved by medical attention obtained for them by one of the organizations.

Ever since the fellowship was founded in 1935, Alcoholics Anonymous has played a large part in the rehabilitation of alcoholics from all walks of life including the skid row alcoholic. The first Alcoholics Anonymous group west of the Mississippi River was founded in Houston in 1940. The group first met in a building on Franklin Street, one block north of the skid row section. At first the membership consisted entirely of what is known in AA as "low-bottom" drunks, or skid row alcoholics. Later, as the movement was publicized in national magazines, it began to attract the middle-class alcoholic, and subsequently the local group was moved from the "Avenue" or skid row section to the southwest section of the city. In 1950 the fellowship of AA realized the need for a "skid row" group and the "Downtown Group"

was formed. It met in a frame building at 1516-1/2 Congress Avenue in the heart of skid row. Strangely enough the clubroom was located between a "beer joint" and a Baptist Rescue mission. Mainly due to lack of strong leadership the membership of the "Downtown Group" remained small, and finally in 1955, the group disbanded. One of the former members, Jimmy O'Rourke, a skid row alcoholic who had served eight years on the local "Pea Farm,"[1] as a result of thirty-eight separate sentences for public drunkenness ranging from five to ninety days each, fought the closing of the only door, he knew from experience, the skid row alcoholic could walk through comfortably. He called a meeting of other skid row alcoholics who had found sobriety through the old "Downtown Group." The meeting was held on the sidewalk in front of the old Downtown Group clubroom, and from this and later meetings enough money was raised to reopen the doors. The group was renamed "the Congress Group," and although it has since moved three times, it is still known by that name.

In 1955 it was almost impossible for a skid row alcoholic to obtain hospitalization to withdraw from the effects of prolonged drinking. The local charity hospital

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[1]The term "Pea Farm" is the nickname given by the inmates to the City of Houston Prison Farm.

was too crowded to admit "alcoholic patients" unless they were in immediate danger of dying. Even those who were admitted, and lived, were discharged as soon as possible. Often a skid row alcoholic, seeking medical help at the charity hospital, would be superficially treated and then turned over to the Police to be put in jail. This discouraged many skid row alcoholics from trying to get sober for they felt they had to have help with the severe withdrawal symptoms of the delirium tremens and alcoholic convulsions, yet they felt unsafe seeking help at the charity hospital. Jimmy O'Rourke solved this problem by taking over the space next to the Downtown group that had housed the "beer joint." He turned this room into what he called "the sick room," which became the most popular "rehabilitation facility" available to the skid row alcoholic in southwest Texas. The "sick room" was originally equipped with two automobile seats, a chaise lounge and two army cots. Later, as the group enlarged so did the "sick room" until now, fifteen men can be cared for at a time. The "drug" used by Jimmy O'Rourke, and still used by the present staff at the group is called "bug juice." This is a three-quarter, one-quarter mixture of muscatel wine and bay-rum. Administered in measured doses at certain times, "bug-juice,"

has the unique capacity to ward off delirium tremens and alcoholic convulsions and to induce appetite in the alcoholic patient. Medical science has long known that it was not so much the alcohol intake that destroyed the alcoholic as it was malnutrition due to not eating properly. Skid row alcoholics have long known that bay-rum, a shaving lotion, would restore the appetite, and sometimes on their own initiative switch to this type of nonbeverage alcohol when they feel themselves getting too weak from prolonged wine drinking. H. Newman et al. confirmed what the skid row alcoholic has known for years that wine taken daily in large doses will, in most cases, absolutely remove any craving for food in the individual.[1]

After five days in the "sick room" the alcoholic is allowed to move to another sleeping section in the Congress group where he can stay from two weeks to one month. There is a regular AA meeting held three times a week as well as the spontaneous "meetings" that spring up daily between older AA members who visit the group and the recovering alcoholics who are housed with the group temporarily. As their health permits, the patients are assigned minor clean-up jobs

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[1] H. Newman and M. Abramson, "Absorption of Various Alcoholic Beverages," Science, Vol. 96 (1942), 44.

around the building, and they are encouraged to help the newer patients in any way they can. Many of the patients after they have recovered sufficiently, are helped to obtain permanent jobs by other AA members. All are given information as to the location and meeting times of the seventy-six AA groups available to them in the Houston area. Each is encouraged to find a group which suits his particular personality and temperment, and once he finds such a group to take an active part as he feels capable.

As in the case of the Missions and the Salvation Army, there are no exact figures available as to the percentage of alcoholics who contact Alcoholics Anonymous and achieve long-term sobriety. It has been estimated by the Central Office of Alcoholics Anonymous that seventy-five percent of the alcoholics that contact AA, do achieve long-term sobriety, often after several "slips." It is an established fact that the membership of Alcoholics Anonymous has grown from two members in 1935 to over four hundred thousand at the present time.[1] Ninety-seven per cent of the men included in the study sample report had contacted Alcoholics Anonymous.

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[1]"About Alcoholism," AA Grapevine, The International Monthly Journal of Alcoholics Anonymous, Vol. 24, No. 1 (June 1967), 40.

One reported he had stayed sober over five years while attending AA regularly. Several others reported they stayed "dry" for periods exceeding one year while taking an active part in the fellowship of Alcoholics Anonymous. In general members of the research sample expressed positive feelings toward AA. Of those interviewed that expressed a desire or a "hope" to one day sober up and get off the "Avenue," almost all of them felt it would have to be with the help of Alcoholics Anonymous.

Houston Police Department statistics show that of the 61,985 arrests made by the Houston Police Department in 1966, 26,453 were for public intoxication. Police officials estimate that of the 26,543 arrests, approximately two thirds (65%) to three fourths (75%) were made among the bottom ten per cent of the alcoholic community.[1] This "bottom ten per cent" includes the "skid-row bum," the "wino," and the "sociopathic-hobohemian" who inhabit the "Avenue" or skid row section in Houston. From interviews with Houston police patrolmen who work the skid row area the problems that arise most often invoke the police practice called "keeping the peace" rather than "law enforcement" which demands more

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[1] C. Raymond Judice, "Public Intoxication," Texas Bar Journal, Vol. 30, No. 5 (May 1967), 341.

stringent control. The procedures employed in keeping the peace are not determined by legal mandates so much as they are responses to certain demand conditions. Major among these conditions is the concentration of certain types mentioned above, such as the "skid-row bum," the "wino," et cetera. As Bittner points out, the lives of the inhabitants of skid row are in most instances lacking in prospective coherence.[1] The consequent reduction of predictability constitutes the main problem of keeping the peace on skid row. One of the major complaints made by the subjects in the research sample was: "I was just standing there, minding my own business, and they picked me up and charged me with being drunk." This type of arrest is most often the result of a police practice known as "sweeping the street." Answering a disturbance call to a point within the "Avenue" section the Police will arrest, not only those involved in the "disturbance," but all others in sight who have the appearance of being a "skid row bum," a "wino," et cetera. This tendency to proceed against persons mainly on the basis of perceived risk rather than on the basis of culpability, springs from the desire of the patrolmen to reduce the

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[1]Egon Bittner, "The Police on Skid-Row, American Sociological Review, Vol. 32, No. 5 (October 1967), 712-715.

aggregate total of troubles in the area. It is easier to eliminate all sources of "trouble" by mass arrest than painstakingly evaluate individual cases of "trouble," on merit.

It was found from interviewing both skid row alcoholics who had been arrested many times often by the same officer and patrolman who worked the skid row area on a regular basis, that rapport or a fondness existed in many instances between the arrestor and the alcoholic offender. While it is true that most skid row people seek to avoid police authority, it is also true that officers encounter men who welcome being arrested and who even actively ask for it. One patrolman reported that he had, several years ago, arrested the same skid row alcoholic for public intoxication in the same exact location every Monday morning for eleven consecutive weeks. The alcoholic would be taken to jail, get sober, and immediately be made a trusty cook in the jail. After spending from three to five days as a trusty, he would have served his sentence and he would be released in time to get drunk over the weekend. The Corporation Court judge finally put a stop to the proceedings by fining him an amount which required his serving a lengthy sentence on the City Prison Farm (Pea Farm).

Arrest for public intoxication is an "occupational hazard" inherent to living on skid row. The skid row population accepts arrest as a way of life and it carries no stigma. The arresting officers, who must sometimes answer criticism for what appears to the observing public as "mass indiscriminate arrests," point out that sending a person to jail from skid row does not upset his relatives or his family life, does not cause him to miss work or lose a job, does not lead to his being reproached by friends and associates, does not lead to failure to meet commitments or protect investments, and does not conflict with any but the most fluid intentions of the arrested person. Because of his immunity to the effects of arrest, the skid row alcoholic learns nothing from the experience, and the Police Officers who must work the area feel free to use arrest as a kind of free-wheeling peace keeping device, often at the cost of "due process." Chambliss, in his analysis of the laws of vagrancy has pointed out that status groups for many years have used the laws of vagrancy to furnish themselves with everything from free labor to a clear conscience.[1] The latter is accomplished by demanding that the Police "remove" the offender from public

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[1]William J. Chambliss, "A Sociological Analysis of the Law of Vagrancy," Social Problems, Vol. 12, No. 2 (Summer 1964), 70-77.

sight, thus preserving the false assumption that the problem either does not exist or is under control. It is obvious, at least in the case of the skid row alcoholic, that the situation is changing. Recent suggestions that the handling of the chronic drunk offender be taken out of the realm of the Police and the lower criminal courts, and placed in the hands of a public health agency is witness to the fact the general public is becoming aware that past methods of handling public intoxication offenders has not only been expensive, it has been ineffective in deterring the chronic offender.

In the State of Texas, criminal accountability for public intoxication is established by Article 477 of the Texas Penal Code which provides: "Whoever shall get drunk or be found in a state of intoxication in any public place, or at any private house except his own, shall be fined not exceeding One Hundred Dollars." In the mid-sixties the imposition of criminal penalties for public intoxication came under attack in at least two jurisdictions. In Easter vs. District of Columbia, 361 F. 2d 50 (July 1966) the United States Court of Appeals for the District of Columbia held the common law principle that conduct cannot be criminal unless it is voluntary. In Driver vs. Hinnant, 356 F. 2d 761

(March 1966) the U. S. Court of Appeals for the Fourth Circuit held that the conviction and subsequent fine or incarceration of a chronic alcoholic for public intoxication violates the prohibition against cruel and unusual punishment of the Eighth Amendment. In June of 1968 the Supreme Court of the United States in Powell vs. State of Texas, 392 U. S. 514 ruled on the constitutionality of the public intoxication statute of the State of Texas (Vernon's Ann. Tex. P. C. art. 477). In upholding a finding of guilty under the statute the court stated that the appellant (Powell) had not been convicted for being a chronic alcoholic, but for being in public drunk on a particular occasion. It went on to say that the State of Texas had not attempted to regulate appellant's behavior in the privacy of his home but rather had imposed upon appellant a criminal sanction for public behavior which might create substantial health and safety hazards, both for the appellant and the general public, and which offended the moral and esthetic sensibilities of a large segment of the community.

In 1966 the Houston Corporation (Municipal) Courts received the outstanding court clinical program award of the North American Judges Association for the rehabilitation program devised by Judge C. Raymond Judice. In an article

written that year, Judge Judice spoke of the role of the Police and the Court in the treatment of the chronic drunkenness offender:

> Obviously the police and the courts, including the municipal (corporation) courts, cannot be converted into social agencies, nor can the state statutes be ignored. While the court, as an institution, cannot become involved in the actual treatment and rehabilitation programs, the Judge, by individual leadership, persuasion, and cooperation can interest various social agencies in establishing rehabilitation programs for the alcoholic offender outside the confines of the courtroom.[1]

When the Houston Alcoholic Rehabilitation program began, the first step was to reevaluate the basic attitude of the Police and the Corporation Court toward the alcoholic defendant. The first step in changing the existing attitudes was to assign one magistrate to the alcoholic docket rather than the previous system of alternating judges. This change enabled the presiding judge to become better acquainted with the individual offenders and their alcoholic problem, and to gain increased knowledge in dealing with alcoholics as a group. Defendants also began to hear themselves addressed by the courtesy title of "Mister" while before the court. Consultations with the court personnel, police officials, and jail personnel reshaped prevailing attitudes

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[1] C. Raymond Judice, "Public Intoxication," Texas Bar Journal, Vol. 30, No. 5 (May 1967), 341-345.

toward the defendants with the result that the defendants began to regain a measure of self-respect.

As part of the development of a rehabilitation program, Judge Judice established a central Advisory Committee on Alcoholism. This committee consisted of representatives from most of the agencies in Houston which dealt with the problems of alcoholism. From the time it was formed the Central Advisory Committee under the chairmanship of Judge Judice, met monthly for lunch, and during the meetings evaluation of current programs was accomplished, new programs were discussed, and existing programs were supplemented. The meetings are still held monthly, and the Committee is still very active.

One of the major accomplishments of the Central Advisory Committee on Alcoholism was in the area of education and information. Due to the work of the Committee the problem of the incarcerated alcoholic is no longer "swept under the rug." In addition and perhaps even more important, the arrested skid row alcoholic now has available to him up-to-date information as to where and how he can seek help for his alcoholic problem. All he need bring with him is what many consider the essential ingredient to any human healing, the desire to change.

Since the mid-fifties there has been an excellent rehabilitation program available to the skid row alcoholic veteran at the Veterans' Administration Hospital in Houston. Within the last two years, several of the hospitals in the Houston area have instigated alcoholic rehabilitation programs financed through Federal grants. The local office of Vocational Rehabilitation has been doing intensive followup work with the alcoholic patients released from these hospitals. Only six per cent of the total sample in this study took part in any of the hospital programs and this fact, coupled with time and space limitations, precludes giving in detail the scope, philosophy, and focus of any of the hospital programs.

Chapter II touched briefly on the history of skid row in Houston and in the nation, and reported pertinent research on the skid row alcoholic. The latter part of the chapter dealt with the treatment facilities which have been, and are available to the skid row alcoholic through the Missions, the Salvation Army, Alcoholics Anonymous, and the Houston Police Department and/or the Corporation Court.

An analysis of the data obtained from responses to the questionnaire is presented in Chapter III. In the latter part of the chapter the findings of this research are compared with those of other studies done in the same area.

CHAPTER III

ANALYSIS OF THE DATA

The questionnaire which was used as the basis for this research was designed to describe life patterns as well as specifics in such categories as family relationships, marital relationships, peer relationships, residential mobility, employment history and earning capacity, police involvment, drinking history and patern, use of treatment facilities, and church affiliation. In the following section these categories are discussed in detail and questionnaire responses within each category are presented in tabular form either in the text or in the Appendix. A complete copy of the questionnaire can be found in the Appendix.[1]

Responses to Questionnaire Items

Not all questions lent themselves to a specific category and during the collection of the data, information was developed which was not a specific questionnaire item. The fact that a majority of the study sample (54%) were veterans and all were caucasian are illustrations of these points.

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[1]Appendix A. Sample Questionnaire, p. 109.

Descriptive Characteristics and Parental Situation at Time of Leaving Home

The data in Table I show that the "typical" or average subject in the study sample is between 35 and 45 years of age with a mean average age of 41.2. As a group the ages ranged from under 20 years (2%) to over 50 years (20%). Six per cent of the skid row alcoholics interviewed in Houston ranged in age from 20 to 30, forty-three per cent were between 30 and 40, and twenty-nine per cent fell into the 41 to 50 age category.

The majority of the study sample (62%) failed to graduate from high school. The mean average grade completed was 10.1; thirty-eight per cent did complete high school, fifteen per cent completed some college work, and six per cent obtained their college degree. The data thus did not support the popular "legend" that skid row is inhabited by a large number of highly educated or professional people. In fact only one "professional person was included in the study sample--an attorney from a state other than Texas.

As shown in Table I the data reflect that while the majority of the subjects who made up the sample came from parental homes unbroken by either death or divorce, most reported "poor" relationships with their parent(s) (49%)

TABLE I

100 ALCOHOLICS LIVING ON SKID ROW IN HOUSTON, TEXAS BY SIX DESCRIPTIVE CHARACTERISTICS

Present Age	Number	Per cent
Under 20	2	2.0
20 - 30	6	6.0
31 - 40	43	43.0
41 - 50	29	29.0
Over 50	20	20.0
Total	100	100.0
Mean Age 41.2		
Both parents living when you left home?		
Yes	67	67.0
No	29	29.0
Both parents dead	4	4.0
Total	100	100.0
How did you and Parents get along?		
Poor	49	49.0
Fair	27	27.0
Good	20	20.0
Orphan	4	4.0
Total	100	100.0

Highest Grade in School	Number	Per cent
Grade School - 1 - 8	21	21.0
High School - 9 - 11	41	21.0
High School Graduate	17	17.0
Some College	15	15.0
College Graduate	6	6.0
Total	100	100.0
Mean grade 10.1		
Parents Divorced when left home?		
Yes	36	36.0
No	60	60.0
No response[a]	4	4.0
Total	100	100.0
How often do you see your parents, if alive?		
Never	34	34.0
Rarely or seldom	42	42.0
Often	8	8.0
No response[b]	16	16.0
Total	100	100.0

[a] 4 males of the study sample were orphan.

[b] 16 males of the study sample reported death of both parents by time of interview.

while they were at home. Separation from the parent(s) did not heal the breach as only a small percentage (8%) reported they visited with their parent(s) "often." The balance of the subjects who had parents living at time of interview reported they saw them "rarely" (42%) or "never" (34%).

Marital History

A large majority (92%) of the males in the sample married at least once. The data in Table VI shows more than three-quarters of the total sample (80%) married before they were 26 years of age. More than one-half of these marriages ended in divorce in less than five years.[1] Most of the subjects married again, one as many as nine times, but at the time of interview only eighteen of the subjects reported they were still married. Of these only one-half had seen their spouses within the last six months.

More than three-quarters of those who married fathered children. More than one-half of the fathers (62%) reported having only one or two children, thirteen per cent of the fathers interviewed reported having four or more children. Skid row living is no more conducive to satisfactory role performance as a father than it is to satisfactory role per-

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[1]Appendix B. Table VI. Marital History, p. 118.

formance as a husband as witness the fact that less than one-quarter (24%) of the fathers interviewed had even seen their children within the past year.

Friendship Relationships

Most of the sample reported an inability to relate deeply to other members of their peer group. This fact is supported by the data which indicate fifty-one per cent of the subjects stating they never had a "close friend" or not knowing whether or not they had ever enjoyed this type of relationship. Most of those subjects who reported having "close friends" had not seen them in over a year.[1] The fact that most of the subjects replied in the negative in this category would lead to the conclusion that the majority of the research sample are social isolates for in the three major areas of human to human relationships, parental, marital, and peer, most had reported less than satisfactory experience.

Residence in Houston

While the word "hobo" is seldom heard in this day and age, no other term quite describes the mobility of most skid row alcoholics. Members move from city to city and from skid

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[1]Appendix C. Table VII. 100 Alcoholics Living on Skid Row in Houston, Texas by Two Items Descriptive of Close Friends, p. 119.

row "flop house" to "skid row hotel," and back with amazing frequency. While not a questionnaire item, many of the subjects reported during the course of the interview that they had, at least on occasion, "stayed in the weed patch." To "stay in the weed patch" means to sleep (or pass out) in a location where rent is not required. In the warmer months the "location" might well be a vacant lot grown high in weeds that serve to hide the sleeping alcoholic from the cruising patrol cars. One of the more enterprising subjects in the sample reported sleeping several nights under an overgrown and untrimmed hedge located approximately five feet from the sidewalk at one of the busiest intersections in downtown Houston. During the winter months when temperature forbids outdoor sleeping, a vacant building or store can serve as temporary living quarters for those skid row alcoholics who have no "lodging" money, only "wine" money, left in their budget. When consideration is given to the "mobility" of most skid row alcoholics it should be remembered that by the time they get to skid row they have long ago either lost or abandoned all but the most necessary of their earthly possessions. Anything that does not fit into "skid row luggage," a grocery store shopping bag, is considered excess baggage and is sold or discarded. Past prop-

erty settlements involving the ownership of real estate are most often summed up by the bitter phrase: "She took the inside and I took the outside."

Approximately two-thirds (64%) of the sample had been in Houston one year or less at the time of interview.[1] The same percentage had been at their last residence less than five weeks and had moved from one to nine times since coming to the city. Thus, "to live on skid row" actually means to "hang out" in a prescribed area rather than to continually reside at a specific address within that area or section. Such common creature comforts as a mailing address or a telephone are among the sacrifices that must be made by the skid row alcoholic.

Work History

While eighty-one per cent of the total research sample stated that they had a "regular" trade or occupation, only thirty-nine of them had worked at it during the past twelve months.[2] Almost three-quarters (71%) of the sample reported

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[1]Appendix D. 100 Alcoholics Interviewed on Skid Row in Houston, Texas by Three Items Descriptive of Houston Residence, p. 120.

[2]Appendix E. 100 Alcoholics Interviewed on Skid Row in Houston, Texas by Five Items Descriptive of Work History, p. 121.

that the highest rate of pay earned by them was between $3.00 and $5.00 per hour. Twenty-three per cent stated that their highest rate of pay exceeded $5.00 per hour and one subject reported earnings in excess of $18,000 for one twelve month period. Four-fifths of the total sample (82%) reported they had worked at some job in the last six months. The majority (69%) earned $1.60 an hour or less for their labor.

Labor Pool or Odd Job Work Experience

While the majority of the sample were capable of making in excess of $3.00 per hour, most had only earned $1.60 an hour or less for their recent labor. The drop in hourly wages is explained by the fact that most of the alcoholics interviewed on skid row worked only for a "Temporary Labor Contractor" or "Labor Pool" in the recent past and these business organizations pay their help the minimum wage of $1.60 an hour, the least they can under Federal wage regulations.

As may be seen in Table II more than three-quarters of the total sample (76%) had worked for one of the local Labor Pools since coming to Houston. Most of the men (66%) who were employed by Labor Pools worked for three or more of the approximately fifteen companies in the area. Due to an acute shortage of "warm bodies" in the Houston labor market,

TABLE II

100 ALCOHOLICS KNOWN TO SKID ROW IN HOUSTON, TEXAS BY SEVEN ITEMS DESCRIPTIVE OF LABOR POOL EXPERIENCE

Labor Pool History	Number	Per cent
Worked out of a Labor Pool		
Yes	76	76.0
No	24	24.0
Total	100	100.0
Place paycheck was cashed		
Bar	65	85.0
Elsewhere	11	15.0
Total	76[a]	100.0
Worked at odd jobs in the skid row area		
Yes	79	79.0
No	21	21.0
Total	100	100.0
Trouble Getting Money		
Yes	43	54.0
No	36	46.0
Total	79[b]	100.0
Paid as Promised		
Yes	73	94.0
No	3	6.0
Total	76[a]	100.0
Number of Labor Pools in Houston worked		
One	7	9.0
Two	19	25.0
Three	18	24.0
Four or more	32	42.0
Total	76	100.0
Highest rate these jobs paid		
$1.60 per hr. or less	62	78.0
Over $1.60 per hour	17	22.0
Total	79[b]	100.0

[a] 24 males of the study sample had never worked for a Labor Pool, and were not included in this total.

[b] 21 males of the study sample had never worked at odd jobs in the skid row area.

the local Labor Pools ("Slave Markets" as they are known on skid row) pay their temporary help as promised. There were but three of the subjects who reported having any trouble getting their daily pay. This difficulty was due to their claiming injury on the job and the agency wanted to keep them available until the company doctor had completed his examinations. Of the total subjects who had worked for a Labor Pool in Houston the vast majority (85%) cashed their daily pay checks at a bar, most often located close to the Labor Pool operation. The investigation revealed that this high percentage is due more to design than coincidence or proximity and in fact appears to be part of a plan whereby the Labor Pool insures itself of a steady supply of temporary employees. The Labor Pool pays its temporary help, by check, after six o'clock in the evening, long after the banks and most local business establishments have closed. The skid row alcoholic with dirty clothes and little if any identification has a hard time finding a place to cash his payroll check. His thoughtful employer, the Labor Pool, comes to his rescue through an arrangement known as a "float." The employee is referred to a nearby bar where the owner will cash his check immediately with no questions asked. As a matter of "honor" most of the men feel an obligation to buy at least "one beer" from the establishment

that was kind enough to "help them out." Quite often the man will spend his entire pay check (usually about $10.50) without ever leaving the bar. As a return favor to the Labor Pool for the "moneyed referrals," the bar owner never runs the Labor Pool pay checks through the bank, thus saving the Labor Pool operator the account activity charge at the bank. Once a week the Labor Pool buys all of the "cashed" pay checks back from the bar owner by a lump sum payment. Several of the subjects reported that they would not work for a Labor Pool if they were trying to stay sober. They knew they would end up in a bar to cash their checks and, if past experience held true, wake up drunk and broke after having worked one day.

More than three-quarters of the total sample (79%) reported they had worked at other odd jobs since coming to Houston. Most (62) stated they were paid the minimum wage ($1.60) or less. Many of them worked at "paper hanging" which is distributing circulars door to door. Few stayed at this occupation for long as the employers preferred to pay on a weekly rather than a daily basis. Too many of the men found themselves elsewhere, such as jail, on payday.

Donation of Blood

Another popular way of acquiring money on skid row is to "donate" (sell) blood or plasma. Almost three-quarters of the total sample (70%) reported selling blood or plasma within the last twelve months, most of them more than three times.[1] It takes almost three times as long at the "Blood Bank" to give (sell) "plasma" as it does whole blood. In this process "whole" blood is taken from the donor, certain protein is removed, and the blood is returned to the donor. The advantage of this lengthy process for the skid row alcoholic is that "plasma" can be sold three times a week for many weeks whereas whole blood can be sold only once every six weeks. Of the seventy who sold blood or "plasma," forty-seven reported receiving less than $7.00 a pint. Those who sold "plasma" on a regular basis received $5.00 to $6.00 a pint for the first two pints per week, and a bonus of $4.00 or $10.00 a pint for the third pint. To have $22.00 per week in steady income is to approach economic security on skid row.

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[1]Appendix F. Table X. 100 Alcoholics Interviewed on Skid Row in Houston, Texas by Two Items Descriptive of the Donation of Blood, p. 122.

History of Arrest for Drinking

More than one-half of the total sample (61%) had been arrested for drinking before they were 22 years of age. Of the remainder, one-fifth (20%), were arrested before they were 26 years old and the balance (19%) avoided arrest for drinking until they were over that age. While not a specific questionnaire item, the correlation between age at onset of drinking and age of first arrest for drinking provides interesting data that point toward possible predisposition of the skid row alcoholic at an early age toward later serious difficulties with alcohol. Twenty-two per cent of the total sample were arrested for drinking during the first year of their drinking. Forty-five per cent had trouble with the law due to drinking between two and four years after taking their first drink. Only seventeen per cent drank for over seven years before becoming involved with the police due to their drinking.

As to the immediate past, the data in Table III show twenty-nine per cent of the total sample having been arrested between one and three times for public drunkenness in Houston or elsewhere during the last twelve months. A larger percentage (37%) had been picked up for drinking (although on occasion the charge might have been "vagrancy"

TABLE III

100 ALCOHOLICS KNOWN TO SKID ROW IN HOUSTON, TEXAS BY SIX ITEMS DESCRIPTIVE OF ARREST HISTORY

Arrest History	Number	Per Cent
Age at First Arrest		
17 years or under	23	23.0
18 years to 21 years	38	38.0
22 years to 25 years	20	20.0
Over 25 years of age	19	19.0
Total	100	100.0
Drinking Arrests in last 12 months		
1 to 3 times	29	29.0
4 to 7 times	37	37.0
Over 7 times	30	30.0
None	4	4.0
Total	100	100.0
When was the last time		
Within last 30 days	63	65.0
Over 30 days ago	33	35.0
Total	96[a]	100.0
Longest sentence for drinking in last year		
1 to 4 days	14	15.0
5 to 10 days	33	34.0
Over 10 days	49	49.0
Total	96[b]	100.0
How many times on the "Pea Farm"		
1 to 3 times	56	56.0
4 to 6 times	13	13.0
Over 6 times	9	9.0
Never	22	22.0
Total	100	100.0
Made "Trustee" at Houston Jail in last 12 months		
Yes	27	27.0
No	73	73.0
Total	100	100.0

a & b 4 males in the study sample had never been jailed for drinking while in Houston, Texas and were not included in these totals.

or loitering") between four and seven times. While a small percentage (4%) had somehow avoided arrest entirely, the remainder (30%) had been arrested over seven times in the past year. The data also revealed that of the total (96) arrested, sixty-three had been arrested at least once within the last thirty days. In considering these data, it should be remembered that one-half of the total sample were interviewed while they were incarcerated.

Although Houston has one of the most progressive and enlightened Municipal (Corporation) Courts in the United States, repeated arrest for public intoxication, in the absence of mitigating circumstances, requires stricter penalties with each occurrence. On first arrest, a finding or a plea of guilty to the offense usually brings a $5.00 fine. If the offender cannot pay the money, serving one day in jail will satisfy the fine. Using this formula, a repeat offender with a fine of $50.00 would have to serve ten days in the event he could not pay the fine. In Houston, only short sentences can be served at the downtown city jail; prisoners with longer sentences are sent to the City Prison Farm ("Pea Farm") where they are required to work rather than just "sit out" their fine. Of the total (96) reporting arrest within the last year, twelve per cent received short sentences of less than five days, a third (34%) were sen-

tenced to serve from five to ten days ($25.00 to $50.00 fine) and the remainder (51%) received a sentence calling for the serving of over ten days on the "Pea Farm" (fine in excess of $50.00). More than three-quarters (78%) of the total sample had served time at the City Prison Farm ("Pea Farm"). Of this total the majority (56) reported going to the "Pea Farm" one to three times. Thirteen had "finished a drunk on the Farm" four to six times and nine had "served time" in the institution on more than six occasions. One subject in the sample, who had been sentenced to the "Pea Farm" more than ten times, remarked, only half-jokingly, "I've spent so much time out here I vote in this precinct." One way to avoid the "Pea Farm" even if the man has a high fine and thus a long sentence to serve is to be made a trusty at the main jail in downtown Houston or at one of the outlying police substations. If the convicted alcoholic can cook, repair cars, or has one of several other usable trades, he has a chance of being kept "downtown" and thus avoid the more physical labor done at the "Farm." More than one-quarter (27%) of the total sample report being made a trusty at the city jail in Houston.

History of Drinking

As shown in Table IV almost one-fifth of the total sample (19%) began to drink before they were fifteen years of age. Approximately two-thirds (61%) started between the ages of fifteen to nineteen, thirteen per cent between ages twenty to twenty-four, and the balance (7%) did not drink until they were over twenty-four years of age. One subject did not start to drink until he was fifty-six years of age. Two years later he was on skid row.

Even more significant are the statistics which reflect the tender age at which the sample, as a group, began to experience "blackouts," a physical symptom which medical science agrees is a clear signal that the human body has used up its tolerance for alcohol.[1] The majority of the total sample (53%) reported suffering "blackouts" before they were 22 years of age. This number includes twenty-two per cent who experienced the symptom before they were 18 years of age and thirty-one per cent who suffered a "blackout" between ages 18 and 21. More than one-quarter (26%) of the total sample "pulled a blank" during a drinking episode between the time they were 22 to 27 years old, and twelve per

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[1] James C. Coleman, Abnormal Psychology and Modern Life, Chicago Scott, Foreman & Company, 1964, 426.

TABLE IV

100 ALCOHOLICS KNOWN TO SKID ROW IN HOUSTON, TEXAS BY SIX ITEMS DESCRIPTIVE OF DRINKING HISTORY

Drinking History	Number	Per Cent
Age at start of drinking		
10 to 14 years	19	19.0
15 to 19 years	61	61.0
20 to 24 years	13	13.0
over 24 years	7	7.0
Total	100	100.0
Age at time of first "blackout"		
16 to 17 years	22	22.0
18 to 21 years	31	31.0
22 to 27 years	26	26.0
Over 28 years	12	12.0
Never had "blackout"	9	9.0
Total	100	100.0
Age at start of morning drinking		
Under 20 years	8	8.0
20 to 30 years	51	51.0
31 to 40 years	31	31.0
Over 40 years	10	10.0
Total	100	100.0
Age when first fired for drinking		
Under 21 years	21	22.0
21 to 25 years	41	41.0
26 to 30 years	12	12.0
Over 30	20	20.0
Never	5	5.0
Total	100	100.0
Age at start of steady wine drinking		
Between 18 and 29	21	21.0
Between 30 and 39	50	50.0
Between 40 and 50	18	18.0
Over 50	6	6.0
Never drank wine	5	5.0
Total	100	100.0
Ever drank non-beverage alcohol		
Yes	63	63.0
No	37	37.0
Total	100	100.0
When was last time		
Within 6 months	42	67.0
Over 6 months	21	33.0
Total	63[a]	100.0

[a] 37 males in the study sample had never drank nonbeverage alcohol and were not included in this total.

cent were over 28 years of age before "blacking-out." Only a small percentage (9%) of the total sample stated they had never experienced a "blackout." Although not a questionnaire item, the percentage of men who reported a short time lapse between the onset of their drinking and their first "blackout" suggests an early predisposition to later serious problems with alcohol by most of the men included in the study sample. Seventeen per cent of the total subjects (91) who had "blackouts" suffered them during the first year of their drinking. A third (33%) experienced the symptom between the second and fourth year of their drinking, twenty-one per cent between the fifth and seventh years, and the balance (29%) drank for over seven years before having a "blackout."

Other "danger" signs begin to appear early in the drinking careers of the majority of the research sample. Over one-half (59%) started to "drink in the morning" before they were thirty years of age. While a small percentage (5%) of the total sample had never been "fired" (which included "just not showing up for work") due to drinking, three-quarters (75%) had lost a job for that reason before they reached their thirty-first birthday.

Probably due to the negative connotation the word "wino" carries with the general population of this country, not only the age, but the day the alcoholic begins to drink

wine as his "daily" drink has meaningful significance in his life. This deduction is not universally true, for a few members of the study sample could hardly remember the decade, let alone the year, they "switched" to wine, but for most of the subjects interviewed this question seemed to require a longer time before responding, and the verbal response was softer than to any other question including those relating to their children. It was almost as if in searching their memory for this age, this day, they were going to have to recall the exact moment in time at which, regardless of whose fault it was, they surrendered to having become all the things they never consciously intended to be. One of the more eloquent members of the sample expressed the depth of the majority feeling when he said: "I had drank wine before, but somehow I knew this time was different. Before had always been a 'hell I'm broke' or accidental type of thing but that day I knew me and wine would be a 'command performance' from now on out. I felt a little like I had just bought my own tombstone and as I sat there, drinking that wine, I remembered, as a kid, I had worried about what had happened to the 'children of Hamelin' and it occurred to me that I was a 'child of Hamelin' who had been delivered into a barren land because of the failure of my parents to meet their responsibility by forcing me to turn away from

the 'wilderness' of my youth. My Piper had used a 'magical fluid instead of a flute, but the results were just as final, and although I might always know where 'home' is, I could never return there, for somehow I had been too tainted by the trip away from there."

Almost three-quarters (71%) of the total sample were drinking wine "steadily" before they were forty years of age. This percentage includes twenty-one per cent who were "steady" wine drinkers before they were thirty, and fifty per cent who became so during their thirties. About a fifth (18%) of the total sample became "winos" in their forties, and a small percentage (6%) held out until they were age fifty or over before "switching" to wine. Five per cent of the sample stoutly denied being "winos" and resented any suggestion that they ever drank anything but "good whiskey."

To the layman it might seem that the drinking of "nonbeverage" alcohol such as canned heat ("squeeze"[1] as it is known on skid row because it must be filtered, usually by "squeezing" through bread or cloth, before drinking) or bay rum (on skid row, an alcoholic who is drinking bay rum is

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[1]"Squeeze" is the nickname given by the skid row alcoholics to canned heat from which small amounts of almost pure alcohol can be obtained by squeezing the gelatin product through cloth.

"riding the bay horse")[1] would be but one more step down the ladder of degradation and although sixty-three per cent of the sample had, on occasion, used nonbeverage alcohol, it was usually either an attempt to "doctor" themselves to avoid the delirium tremens or simply the only alcohol available to the "bottle-gang" they were a member of at the time. No member of the study sample was found who drank nonbeverage alcohol only, and those who had used the chemical in this form were not ostracized for having done so. Of the total subjects in the sample who reported drinking nonbeverage alcohol, forty-two (67%) had done so within the last six months. This finding suggests that once the skid row alcoholic has used nonbeverage alcohol, for one reason or another, he will resort to it again, without hesitation, if the situation demands it.

History of Treatment

As may be seen in Table V more than one-half (57%) of the total sample had been "committed" for alcoholism sometime during their drinking career. In the more recent past, the majority (54%) had gone to a hospital or a short-

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[1] "Bay horse" is the nickname given by the skid row alcoholics to bay rum, an aromatic liquid that contains oils, water, and alcohol and which is usually used as a cologne.

TABLE V

100 ALCOHOLICS LIVING ON SKID ROW IN HOUSTON, TEXAS BY SEVEN ITEMS DESCRIPTIVE OF TREATMENT HISTORY

Treatment History	Number	Per Cent
Committed for Drinking		
Yes	57	57.0
No	43	43.0
Total	100	100.0
Contacted Alcoholics Anonymous		
Yes	97	97.0
No	3	3.0
Total	100	100.0
Been to a Hospital or Drying Out place in last year		
Yes	54	54.0
No	46	46.0
Total	100	100.0
Stayed at the "Mission" in last 12 months		
Yes	77	77.0
No	23	23.0
Total	100	100.0
Stayed at the "Sallie" in last 12 months		
Yes	62	62.0
No	38	38.0
Total	100	100.0
Longest Sobriety in Recent Years		
1 to 14 days	15	15.0
15 to 31 days	23	23.0
2 mos. to 6 mos.	44	44.0
Over 6 months	18	18.0
Total	100	100.0
Been ill (other than for drinking) in last 2 years		
Yes	36	36.0
No	64	64.0
Total	100	100.0

term "drying-out" facility within the last year. Being "forced" to seek medical or "lay" help to withdraw from the prolonged effects of daily drinking is an accepted, periodic occurrence in the life of the skid row alcoholic. Akin to being in "combat" for long periods, skid row existence makes such total demands on the physical and emotional resources of the individual that he must "come off the line" on occasion for rest and recuperation. Many of the men in the study sample spoke with fondness of the treatment and the "drugs" they received during their more recent exposures to local hospitals. There is concern among some of the "treatment" people in the Houston area that the alcoholic, skid row and otherwise, can easily become "addicted" to easy withdrawal from heavy drinking, and actually looks forward to going to the hospital. The two detoxification centers operated by the fellowship of Alcoholics Anonymous in the Houston area seek to limit the "drying-out" experience by restricting the number of times an alcoholic can use their facilities within a twelve month period.

Of the total sample, ninety-seven per cent report having some contact with Alcoholics Anonymous since they started to drink. This high total commends the fellowship of AA not only for the sheer number of facilities they have

made available to alcoholics from all walks of life, but also to the freedom of their philosophy which allows the alcoholic to fail repeatedly and still feel welcome when and if he returns to the fellowship. The majority of subjects interviewed reported seeking help from the Salvation Army (62%) and a "Mission" (77%) within the past twelve months. Most often the "help" desired was a place to sleep only and not "help" with their drinking problem.

The fact that the vast majority of the total sample (82%) had enjoyed less than six months of continued sobriety during the past "few" years is not indicative of the success or failure rate of local treatment programs in the Houston area. By design, the men in the sample were recent or still active "drinking drunks" and data concerning length of sobriety are representative of all in the treatment programs.

The data would seem to attest to either a "natural toughness" or perhaps immunity through "conditioning," for the majority of the total sample (64%) reported they had not been "ill" (other than from drinking) in the last two years. Of the remainder in the sample (36%) who had been "ill" most reported suffering from pneumonia brought on from sleeping in "the weed patch" or from other lung disorders caused in a large part by the constant smoking of cheap "rolling" tobacco.

Church Affiliation

While the large majority of the total sample (94%) reported being "taken" to church as a child, seventy-four per cent to the Protestant church and twenty per cent to the Catholic church, only slightly over one-third (35%) of the sample claimed church affiliation at this time.[1] This number included twenty-six per cent who were members of the same church in which they were raised and nine per cent who had changed churches during their adult life. Of the almost two-thirds of the total sample (65%) who did not belong to a church at this time many of them blamed "gross hyprocrisy" for their dechurched condition. It appears that this harsh judgment was arrived at only after repeated offerings on the part of many in the sample to be willing subjects upon which the Christian disciplines of charity and giving could be practiced, and the repeated failure of most individual church members and denominations tc take full advantage of this gracious offer.

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[1] Appendix G, Table XI. 100 Alcoholics Interviewed on Skid Row in Houston, Texas by Two Items Descriptive of Church Affiliation, p. 123.

Military Service

At the beginning of Chapter III it was mentioned that slightly more than half (54%) of the total sample were veterans of service in the armed forces of the United States. Within this percentage are found the "wealthy" members of the skid row population. Even in this day of inflated prices any government pension of $75.00 or more (per month) insures the individual that he will not have to be sober, or lonely, at least the first ten days of the month. While most of the alcoholic veterans who draw large pensions live away from skid row or the "Avenue" section, many of them cannot resist the monthly urge to return to the area and play the "moneyed big shot." Government pensions are looked on as "something for nothing" by most skid row alcoholics. However, pensions do seem to have a price in that the pension serves as an almost absolute bar to gainful employment. Several of the subjects in the sample reported receiving pensions in excess of $100.00 per month and all were emphatic in their statements that they "didn't have to work, Uncle Sam takes care of me." From their run-down physical condition it looked as if "Uncle Sam" was about to kill them with kindness.

Comparison with Other Studies

In a broad study completed in 1945 Jellinek described the "Phases in the Drinking History of Alcoholics."[1] At the time of interview the average (mean) age of the "typical" alcoholic in Jellinek's research sample was 43.2 years. His data further showed that the "average" alcoholic in his study was drinking at age 18.8, had suffered blackouts by age 25.2, had lost his first job due to drinking by age 30.9, and eventually reached his "lowest" point at age 40.7. In contrast, the average age of the subjects who made up the present research sample was 41.2 years at time of interview. The "typical" subject in the sample was drinking by age 17.4, had experienced "blackouts" by age 21.3, lost his first job for drinking by age 24.1, and had reached a "bottom" (lowest point) by age 36.8 (the age of onset of "steady" wine drinking being "age at time of reaching lowest point.") Actually there was no way of knowing if the subjects who made up the research sample had "gone as far" as they would or could with their drinking. A comparison of the "average" ages of the "typical" subject in both studies shows that the subjects in this study were reaching points on the "drinking

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[1] E. M. Jellinek, "Phases in the Drinking History of Alcoholics," Quarterly Journal of Studies on Alcohol, Vol. VII (June 1946), 6-36.

continuum" at a younger age than in Jellinek's study. However, these data should be considered in the light that Jellinek was interested in the "general" alcoholic population, while the instant study involved a specific group of "low bottom" alcoholics who might have been demonstrating earlier, more severe, psychological damage in their responses.

In a study completed a year later (1946) Straus, from his data, described the "typical" skid row alcoholic in his sample,[1] which taken in broad terms bears a remarkable resemblance, on many points, to his "typical" counterpart in this study. Straus reported "serious emotional conflict" between most of his study sample and their parents. In this sample the majority (49%) reported their relations with their parent(s) had been "poor." Straus mentions that many of his study sample had been married and divorced, often several times, and in this study almost the total sample had married (92%) and later divorced (86%) at least once. The data revealed that the subjects in both studies were almost constantly mobile, moving from one city to another, and from one residence to another within the city. None of the subjects

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[1]Robert Straus, "Alcohol and the Homeless Man," Quarterly Journal of Studies on Alcohol, Vol. VII (December 1946), 360-404.

reported in either study were of the Jewish faith. All who had prior religious affiliation were either Protestant or Catholic and most of the subjects in both studies spoke of their religion in the past tense. Straus reported that the majority of his research sample worked only periodically at unskilled or semiskilled jobs. Although it is easier for the skid row alcoholic to obtain this type of employment through the "Labor Pool" in this day and age, the fact remains that "periodic unskilled labor" is still the employment pattern of most alocoholics on skid row.

In 1966 Katz published a study in which he described the population characteristics of the "typical" skid row alcoholic in the San Francisco, California area.[1] The subjects in his study averaged 45 years of age against 41 years of age in this study. The majority in both studies were Caucasian, and divorced. The subjects in both study samples tended to be protestant, more often Baptist than any other denomination. Katz reported a higher percentage of high school graduates (55) and subjects who had some college education (24%) than in the instant study where the percentage of high school graduates was thirty-two per cent and those

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[1]Lawrence Katz, "Salvation Army Men's Social Service Center," Quarterly Journal of Studies on Alcohol, Vol. 27, No. 4 (December 1966), 636-647.

with some college fifteen per cent. The percentage of those spending some time in an "institution" due to drinking is almost identical with the fifty-five per cent of the California study being involved with some sort of institution. Fifty-seven per cent of this study were likewise involved in institutional withdrawal from the effects of drinking at one time or another. The majority in Katz's study had not performed their "regular" trade or occupation during the six months preceding interview. This finding corresponds to the minority percentage in this sample (39%) who had worked at their "trade" within the last year. As in this study, the "average" subject in the Katz study had a "serious" drinking problem of long duration and he had enjoyed little, if any, continued sobriety in recent years. Frequent arrests and incarceration for public intoxication were reported by the majority in both samples.

Docter sets out the demographic characteristics of 172 male "lower-class" alcoholics interviewed in Southern California during the summer of 1965.[1] As in the studies mentioned above, the similarities between Docter's subjects and the subjects who made up the instant research sample far

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[1]Richard F. Docter, "Drinking Practices of Skid Row Alcoholics," Quarterly Journal of Studies on Alcohol, Vol. 28, No. 4 (December 1967) 700-708.

outweigh the differences in the groups. From his data, Docter describes the "typical" skid row alcoholic in Southern California as being 44 years of age, slightly older than the average age of 41 years reported by the subjects who made up the sample in this study. His sample, as this one, was comprised mostly of white males who were raised in the Protestant tradition. In educational achievement at the higher levels, the samples were almost identical with thirty-two per cent of this sample graduating from high school against thirty per cent in Docter's study. The percentage of subjects who attended college is exactly the same, fifteen per cent, in both studies. During the past year only a tiny percentage (1%) of the subjects interviewed by Docter worked "steady" while the remainder, a majority as in this study, worked only when it was absolutely necessary. The majority of the subjects in both studies were "winos," men who drank mostly wine as their daily drink.

Table XII presents a twelve "characteristic" comparison between the subjects who made up the research sample in this study and the three studies mentioned above.[1] The other three studies were designed primarily to explore a particular

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[1]Appendix H, Table XII. A Four Study Comparison of the Demographic Characteristics of Skid Row Alcoholics, p. 124.

aspect of the life pattern of the individual subjects in the study. Descriptive characteristics were secondary to the main purpose and were kept at a minimum. From the limited data available it may be seen that the subjects in all four studies have many common characteristics.

In Chapter III the responses of the subjects who made up this research sample to the questionnaire were discussed. These were compared with other data, presented in a similar manner, in previous studies in the field. Generally, from the comparison, it was found that the "average" or "typical" skid row alcoholic in Houston, Texas basically resembles his counterpart in other sections and cities in the United States, and that over the years the "profile" of this individual has not changed appreciably. The comparison of the studies did reflect that the "typical" subject in this study was a younger man than in the others and that he married more often. However, it is not the "differences" in the studies that seem significant, but rather the sameness. The interesting question as to why so few "hard-core" alcoholics seek to leave skid row, in this age of enlightenment and economic prosperity, when so many treatment avenues are open to them, will be discussed in Chapter IV.

CHAPTER IV

SUMMARY OF FINDINGS AND CONCLUSIONS

The purpose of this study was to describe the "person" who is the skid row alcoholic in Houston and perhaps give some insight into his life style. In approaching the study, specific basic questions and expectations were stated. The study content is reviewed in this chapter to determine the degree to which these questions have been answered and the expectations fulfilled.

In answer to the first question, "Who is the skid row alcoholic in Houston, and how does he exist?" the data reveal that the "typical" skid row alcoholic in Houston is described in the following profile: He is usually between 31 and 50 years of age, averaging 41.2. He is Caucasian and completed the tenth grade in high school. His early relationship with his parents was "poor" and remains so as he "rarely" visits with his parent(s) at this time. He married before he was twenty-five years of age, but this first marriage ended in divorce within five years. He married again; however this marriage also ended in divorce and at the present time he is single. There were two children born as a result of his marriage(s); however at the time of interview he had not seen his children in over a year. Peer relationships

have always been a problem to him as he has never had a "close" friend. He has been in Houston less than twelve months and during his stay in the city has moved five or more times. During the past year he has spent some time at one of the local "Missions" or at the Salvation Army Men's Social Service Center. While he has a "regular" trade or occupation he has not worked at it during the past year. His only gainful employment in the recent past has been with one of the local "Labor Pools" and while he is capable of earning in excess of $3.00 per hour at his "trace," his recent wages have been the standard $1.60 an hour paid by the Labor Pools. As he does not work daily he often supplements his income by selling blood or "plasma" at one of the several local "Blood Banks." For each pint of blood or "plasma" he sells he receives $6.00.

The "typical" skid row alcoholic in Houston was arrested for drinking before he was 22 years of age or less than four years after he took his first drink. During the immediate past year he has been incarcerated at least four times for public intoxication, and at least once within the last thirty days. Because of his numerous arrests his fine at the time of his most recent arrest was in excess of $50.00 (ten days to serve). As he did not have the cash to pay the fine he served the sentence on the Houston City Farm (Pea Farm).

The "typical" or "average" subject in the research sample started to drink when he was 16.7 years of age. He suffered his first "blackout" before his twenty-second birthday or less than five years after he first started to use beverage alcohol. He began to drink in the morning during his early twenties and had been "fired" for drinking, or "just not showing up for work" due to drinking, before he was 25 years of age. His drinking habits and associates changed drastically during the years from 30 to 40 and it was in this period that he began to drink wine as his "daily drink" and subsequently he drifted down to skid row. At the present time he will, when the occasion demands it, resort to drinking non-beverage alcohol such as "bay-rum," canned heat ("squeeze), et cetera.

At sometime in his drinking career he has been committed for the treatment of alcoholism and he has also contacted Alcoholics Anonymous regarding his drinking problem. During the immediate past year he has had to seek help to withdraw from the physical effects of prolonged drinking. To date none of the rehabilitative efforts expended upon him have had any lasting effect as the longest period of continued sobriety he has enjoyed in recent years has been of less than six months duration. He was reared a Protestant,

more often a Baptist than any other denomination. At the present time he is not a member of any church. He is a veteran of service in the armed forces of the United States.

While the above profile sets out in some detail who is the "typical" or "average" skid row alcoholic in Houston, additional information about who "he is not" may help to remedy the damaged image this individual has in the minds of the general public. The "stereotype" image of the skid row alcoholic is that he is "lazy" and does not want to work. While it is true that this person does not "pursue a gainful occupation on a regular basis," he is a very busy individual. To live on skid row is to "hustle" constantly. New living arrangements must be made often, for some, daily. To work for a Labor Pool means to be present, on their premises, by 6:00 A.M. and being present does not guarantee actual work that day. Whether or not the individual is assigned to a job depends on many factors, such as the number of request orders the agency has for workers, the weather, and on occasion, the whim of the Labor Pool dispatcher who assigns the jobs.

To be able to sell blood or plasma, the second most popular form of legally acquiring money on skid row, is also dependent upon several variables. Often only certain blood

types are in demand and more often the alcoholic finds himself turned down as a "blood donor" because his blood lacks a high enough iron factor. This "low iron" condition can be corrected by eating raisins and many recovered skid row alcoholics swear they quit wine and raisins on the same day.

The most popular, but illegal, form of acquiring money on skid row is to "panhandle." While to ask a stranger on the street for money might, at first glance, seem easy, in actual practice it carries with it an anxiety factor familiar only to those who sell door to door. Many of the subjects who made up this sample related an almost absolute inability to "panhandle" comfortably or skillfully "on the natural" or sober. For this reason they were in agreement that getting the money for "the first bottle in the day" was always the hardest. The major reality that belies "the lazy person" living on skid row for long periods is the constant threat of involvement with the police. Any activity which involves "getting on the street" carries with it the assumed risk that the individual may be arrested for being "drunk" if he has been drinking, or if sober, arrested for "vagrancy" due to his lack of adequate funds to support himself for a reasonable length of time. The actual crime is "being seen" and while it is not a statutory offense, the penalties are quick and can be severe. It was pointed out in Chapter III

that arrest is an "occupational hazard" inherent to living on skid row. This statement was not meant to imply the skid row alcoholic becomes somehow "immune" to the emotional effects of the constant threat of incarceration. One member of the sample remarked, rather bitterly: "For several years the only time anyone ever asked me to 'take a ride' was when the police car would pull up to the curb and the officer would holler 'shut up and get in!'" This type of group treatment is known only to people who have lived under enemy troop occupation of a conquered country, and is an experience which can never be fully "gotten used to." Finally, to work "daily" is a clear violation of the mores of the skid row alcoholic society. The general feeling of the alcoholic population is that any person who finds it necessary to work with that degree of regularity could, by his own choice, live elsewhere. Continued efforts by such an individual to remain in close fellowship with those of less motivation and inclination toward employment is viewed with suspicion and fear.

Another misconception that has evolved from "stereotyping" the skid row alcoholic is that he is psychopathic and of low moral character. Anyone familiar with the dynamics of psychopathy knows that no "self-respecting" psychopath would be seen in the skid row area unless he was there as

part of a self-conceived plan involving later personal gain. The luxury hotel is the domain of the psychopath, not the hallways and alleys of skid row. Rather than being devoid of certain normal "feelings," as in the case of psychopathy, the skid row alcoholic "feels" almost every stimulus in the environment, and the subjects who made up the sample in this study were almost unanimous in their agreement that one of the "advantages" of skid row life is that there is so little "left to lose." To them skid row existence is life narrowed down to its basics and in this condition fear becomes more understandable. Their premise seems to be that to face real fears such as arrest, lack of "necessary" food, shelter, running out of something to drink, the delirium tremens, et cetera, was preferable to daily facing the free-floating fear and existential anxiety inherent to so-called "normal" living in American society. As to the question of morals, the skid row alcoholic has less chance to be immoral than almost any other human being in existence. He is not dressed well enough to embezzle, he is too "rum-dum" to be a "con artist," he is much too nervous to "blow" safes, and he cannot afford a gun. Similar to the heroin addict, the "wino" has sacrificed sexual desire and activity to his chemical. On skid row sex as religion is most often spoken of in the

past tense. Several of the subjects who made up this study reported "boosting" (shoplifting) when the opportunity presented itself. Canned food and ready-to-eat packaged meat were the most popular items acquired in this manner. Other small items, such as transistor radios, that can be hidden easily and traded quickly for wine, were also prized. The most popular "game that people on skid row play" is cops and robbers. Shoplifting is not considered "pure stealing" as much as it is a "Robinhood" type of activity wherein the skid row alcoholic somehow "gets even" for the numerous times he has been arrested without "just cause." Also he is striking back in the only way he knows, at the skid row merchants who he feels have exploited him.

Probably due to his "panhandling" efforts the skid row alcoholic has acquired the stereotype reputation of being a "pathological" liar. In his effort to acquire money from the general public by "strapping a story on a live one" the truth is often badly bent, if not broken. The skid row alcoholic does not really expect the stranger to believe that "the alcoholic's mother is dying of the plague in Bangor, Maine" as much as he "hopes" the "mark" will be impressed by the originality of the tale to the extent he "will spring" for at least one-third (25¢) the price of a bottle of wine.

While sharing a bottle of wine within a "bottle gang" the truth is all but forbidden. Instead of discussing immediate, depressing, reality it is preferable that the members relate the glories of past achievement, the importance of immediate plans, and the certainty of future success and prosperity. This "storytelling" is a form of group entertainment and is not meant to be taken seriously. In their effort to "escape reality" the skid row alcoholic appears to have accepted into his subculture certain "unrealities" which serve to make his harsh life more palatable, if not absolutely honest.

The second question asked was "What treatment facilities have been and are presently available to the skid row alcoholic in Houston?" It was established that the "Mission," the Salvation Army, and Alcoholics Anonymous are the "treatment facilities" of choice to the skid row alcoholic in Houston. While there are several recently funded hospital programs available to the local skid row habitué their very "newness" invokes a "fear of the unknown" which the majority of the skid row population has yet to work through. It is believed that as soon as a few of the "hard-core" skid row alcoholics survive the new hospital programs without undergoing any major change in their basic philosophy regarding (1) drinking, (2) working, and (3) life in general,

more of the "general" skid row population will avail themselves of at least the temporary comfort of these institutions.

The third basic question concerned basic police attitudes and practices in the handling of the skid row alcoholic. The local patrolmen interviewed as part of this research generally took an attitude best described as "parental authoritarian." They responded to the skid row population as a group much as they might to juvenile delinquents whose "crimes," though numerous and visible, were more annoying than serious. The unwritten mandate to the Houston officers seems to be "keep them off the streets" and the police go about fulfilling this demand with efficiency and dispatch. Force is used almost never unless required. Many of the skid row alcoholics in the Houston area owe their life to medical care obtained for them after their arrest. Recent Supreme Court decisions affecting the rights of defendants in criminal actions seem to have had little effect on the handling of the arrested skid row alcoholic. There is little need to give a "Miranda warning" to an arrestee so full of wine he is either incoherent or unconscious, and many of the subjects who made up the sample in this study expressed a greater mistrust of "public defenders" than they did of arresting officers.

The fourth basic question which inquired into the attitudes of the skid row alcoholic in Houston toward proposed rehabilitation programs, was answered in part where it was pointed out that as a group these men view any new program, especially those which require their "living" or being housed away from their natural habitat (skid row) with fear and suspicion. It was recently announced in the Houston newspapers that a "Halfway House" was planned for the chronic drunkenness offender. During the interview phase of this research one-half of the sample was interviewed while they were incarcerated for public intoxication at the City of Houston Prison Farm ("Pea Farm"). Having heard "rumors" of the planned "Halfway House" many of them expressed deep mistrust of the planned facility and stated their preference to "continue to do their sentences on the Pea Farm." In addition to their natural "fear of the unknown" mentioned above, they also seemed to be burdened with the misconception that exposure to this new "treatment" might somehow, magically render them incapable of pursuing their usual habits or change their traits of character. The skid row alcoholic is a classic example of ambivalence; he seems to have a desire to change, at least on occasion, but at the same time he seems to fight against treatment efforts with every conscious and unconscious force at his command. If this

research has anything to say to the treatment community it is to reiterate the Biblical admonition that "A house divided against itself cannot stand" and that one of the major aims of "treatment" should be to help the skid row alcoholic resolve his ambivalence, to move out fully in one direction, even if this means to "curse God and die." An individual fully committed to even the "wrong things" is perhaps closer to accepting "help" than one split by indecision.

In Chapter I it was stated that one of the expectations of a study of this type was that it would establish a "profile" of the "typical" or "average" skid row alcoholic which could then be compared to similar information gathered in earlier studies done on other "skid rows" in the United States. In Chapter III the data acquired as a result of this study were compared in detail with three earlier studies which verified that the demographic characteristics of the "typical" skid row alcoholic in Houston bear a remarkable resemblance to his "typical" counterpart as described in the other studies. The lack of observable "difference" in the studies suggests that skid row continues to represent a response by certain individuals to quite similar early emotional deprivation and psychologically and sociologically damaging experiences, and that their "dropping-out" of contemporary society continues to be their only known means of

striking an uneasy peace with what they consider to be a hostile and unfriendly environment.

Rather than correcting or dispelling the "stereotype" image of the skid row alcoholic as was expected, the data tended to confirm that the "typical" subject in this research sample conformed, at least in demographic characteristics, to what he had been "pictured" from previous research. Effort was made in this concluding chapter to correct the "stereotype" which would show the skid row alcoholic to be (1) lazy, (2) psychopathic and immoral, and (3) a pathological liar. Mercifully (and correctly) the stereotype of the skid row alcoholic does show him to be passive, and thus to a large degree harmless. For this reason the general public does not fear him, and as a result many of them express a fond curiosity as to how these men get to where they are. Although not a questionnaire item, each subject in this research sample was asked: "Why do you live in or continue to return to the "Avenue" (skid row) section?" To this subjective question the almost unanimous answer was: "This (that) is where my friends are." What they seemed to be saying as a group was that only on skid row had they ever experienced a sustained measure of freedom from anxiety over the unresolved estrangement in their person-to-person or

human relationships. Only on skid row could they be comfortable and relaxed in fellowship with their own kind. In this particular the men of skid row resemble to a large degree the repeat offender in the penitentiary who, in constant trouble and turmoil in the "free-world," is somehow able to relax and almost seems to enjoy himself in confinement.

The expectation that the data might reveal common etiological factors present in the life histories of the research sample was, to a degree, fulfilled. In a summary of the theories as to the causation of alcoholism set out in Chapter I it was stated that "the alcoholic is seen as having been rendered vulnerable by early security-threatening experiences of deprivation and as a result appears to be estranged and isolated. without the capacity for close relationships." The pattern of estrangement from significant others and isolation from his peers was supported by the data which showed the majority of the research sample to have had a "poor" relationship with their parents, to have dissolved their early marriage quickly by divorce, to be all but strangers to their children, and to have never benefited from the comfort of a close relationship with their peers. The difference between knowing a person and knowing about a person is vast, and often during the interview phase of this

research a subject would drop his defenses and began to relate personal information and emotions with all the feeling tone of being told for the first time. In prison when trouble comes the punishment most often is isolation. The subjects who made up the sample in this study, by and large, seem to have been in that state most of their natural lives. In prison, one knows whom to blame and whom to curse and thus the "punishment" is understandable and bearable, but to be "sentenced" to an apparent life sentence in isolation in the free-world for "crimes" never explained would perhaps account for the hostility and chronic rage often displayed by the alcoholic in general, and the skid row alcoholic in particular. Several times it has been mentioned in this study that skid row existence serves as a partial solution to this population's human need to live in community relationships. It was not meant, however, that skid row relationships are ever much more than surface and transistory, and as a consequence can never be fully satisfying. The subjects who made up the research sample in this study were, in the main "loners," who by virtue of their common psychological and sociological problems had finally searched out a meeting ground on which they could mingle comfortably.

As expected, the data derived in the course of this study confirmed the already suspected fact that to become a

full-fledged member of the skid row "fraternity" requires an expenditure in terms of lost earning ability and opportunity which far exceeds the fees demanded by the most exclusive clubs across the world. The majority of the research sample was capable of earning in excess of $3.00 per hour; simple mathematics shows that the "typical" subject, had he stayed sober and worked a normal 40 hour week over a one year period, could have earned at least $6,240. Although this study was not designed to establish the "average yearly income" of the subjects who took part, Katz, in his study found that the "typical San Francisco skid row alcoholic earned approximately $900 a year while living on skid row.[1] Projecting that wage figure to this study would establish that, hypothetically, the "typical" subject in the sample lost approximately $5,340 each year as a result of his alcoholism and living on skid row. If we further assume for the sake of round figures that each member of this study sample has lost the above money amount due to not working according to his capabilities during the immediate past year, the aggregate loss to this small group exceeds half a million dollars per year. Even in this age when large sums of money

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[1] Lawrence Katz, "Salvation Army Men's Social Service Center," Quarterly Journal of Studies on Alcohol, Vol. 27, No. 4 (December 1966), 636-647.

are mentioned casually, this amount is impressive, and were it possible to place a currency value on human talent, the total wasted yearly on skid row in Houston and other American cities would be astronomical.

The final study expectation was that sufficient material for the formulation of hypotheses for further more explicit research would be available. Rather than state a series of hypotheses, however, some areas of research-need will be commented on as part of the study conclusions to follow.

One of the features of currently existing literature and research data related to the skid row alcoholic in the American cities is that most, by concentrating on a particular aspect of the subculture, tend to "fragment" the alcoholic individual who lives there. More research of the kind attempted in this study is needed to reemphasize the person who resides on skid row rather than the things he does while living there. There is also an obvious need for research based on the use of psychological testing instruments. As was pointed out in Chapter I, the skid row alcoholic tends to put on a "treatment face" while confined in a hospital or clinic. However a properly trained and orientated researcher might possibly be able to secure the information

while working within the skid row area. In order to successfully accomplish research of this kind, it would be necessary that the individual(s) attempting it be secure enough in their person to be able to feel "real" love and concern for those who would be their subjects. One of the redeeming realities of life on skid row is that, while superficial lying is permissible, outright "phoniness" is not. Like all other immature people, the skid row alcoholic feels rather than reasons, and any attempt to mask, with words, real feelings of disgust, fear, rejection, et cetera, will be detected immediately. Thus although the prospective subject might physically remain in the presence of the researcher, he will psychologically disappear.

A most neglected individual in the research field is the female counterpart of the male skid row alcoholic, the female skid row alcoholic or "winet" as she is known. Although these individuals are seldom seen on the streets of skid row, they are very familiar to the owners and operators of the cheap hotels and rooming houses that dot the area. When they are seen on the street, it can be quite a spectacle. During the interview phase of this research in the skid row area, five policemen were observed trying to put a "winet" into a waiting police car. Her manner and means of resist-

ance to this considered indignity would have warmed the heart of a "Green Beret." During the course of this research, several "winets" were encountered and during the brief contact with them, it became obvious that anyone attempting to do research with this group should be possessed of a degree of "toughness" in his personality. Female skid row alcoholics seem to have a peculiar way of destroying scientific objectivity and in some strange manner the researcher begins to feel personal guilt for the tragic condition of his interviewee. It is perhaps somehow involved in countertransference and motherhood, but in any event, it can be distracting.

Research into the effects of severe alcoholism on the members of the Afro-American and the Mexican-American groups, where the use of alcohol and manhood are somehow tied together, would be of extreme interest and value. Although both minority groups are well represented in the general population of Houston, no members from either group were found among the "regular" skid row population during the course of this research. Perhaps to a lifetime ghetto resident moving to skid row is not considered a downward move.

In addition, a great deal more basic research is needed addressed to the etiological relationship between

environmental factors and skid row alcoholism. Further efforts are needed to develop comprehensive, correlated "typologies" of pathologies involved in the illness of alcoholism, and effective techniques and methods of intervention.

The main limitation in a study of this type is the smallness of the research sample. Although there are no exact figures available which would establish the population of skid row in Houston, police and Corporation Court records of arrests and sentencing for the offense of Public Intoxication in the year 1968, permit the estimate that the skid row population in Houston during that year was approximately 28,000 persons. These figures are not meant to imply that this large number of alcoholics live or exist within the thirteen block "Avenue" or historical skid row section described in Chapter I. Many of them do return to the "Avenue" daily for fellowship and the sharing of a bottle of wine. However most actually "stay" in the rapidly deteriorating, once beautiful residential areas just east, west, and south of the immediate downtown area. The other obvious limitation of this study is that the research (interviewing) was done by only one person. It would have been extremely interesting and valuable if at least one other person could have been involved in the project and a comparison made of

the data collected by each. In this manner subjectivity could have been minimized.

This research has served to remind the author that while the skid row alcoholic in Houston is, like all other men, a human being who is not perfect, but if given the proper help he still has all the human capabilities and possibilities of any man. He is not beyond rehabilitation and/or resocialization. Society has not yet found the way to consistently reach him. It is hoped that this effort will encourage those with the necessary talent to continue the search for the proper means. It is hoped also that this study will remind those of less kindly orientation who would pass harsh judgment on the so-called "skid row drunk" of Gibran's words:

> And you who would understand justice, how shall you you unless you look upon all deeds in the fullness of light?
>
> Only then shall you know that the erect and the fallen are but one man standing in the twilight between the night of his pigmy-self and the day of his God-self.
>
> And that the cornerstone of the Temple is not higher than the lowest stone in its foundation.[1]

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[1] Kahlil Gibran, The Prophet, New York, Alfred A. Knoff, 1963, 43.

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A P P E N D I X

APPENDIX A

SAMPLE QUESTIONNAIRE

Part A. Descriptive Characteristics and Parental Situation at Time of Leaving Home

1. Present Age?

Under 20 years	( )
20 - 30 years	( )
31 - 40 years	( )
41 - 50 years	( )
Over 50 years	( )

2. Highest grade in School?

Grade school (1 - 8)	( )
High school (9 - 11)	( )
High school graduate	( )
Some college	( )
College graduate	( )

3. Were both parents living when you left home?

Yes	( )
No	( )

4. Were your parents divorced when you left home (if alive)?

Yes	( )
No	( )

5. How did you and your parents get along?

Poor	( )
Fair	( )
Good	( )
Orphan	( )

6. How often do you see your parents (if alive)?

Never	( )
Rarely (Seldom)	( )
Often	( )

Part B. Marital History

1. How old were you when you first married?

Under 21 years	( )
21 - 25 years	( )
26 - 30 years	( )
Over 30 years	( )
Never married	( )

2. How long did your first marriage last?

Two years or less	( )
Four years or less	( )
Over four years	( )
Still married	( )

3. How many times have you been married?

One time	( )
Two times	( )
Three times	( )
Over four times	( )

4. Are you married now?

Yes	( )
No	( )
Unknown	( )

5. If married, how long has it been since you saw your wife?

Within 3 months	( )
Within 6 months	( )
Over 6 months	( )

6. How many children do you have?

One	( )
Two	( )
Three	( )
Four	( )
Over four	( )

7. When was the last time you saw any of your children?

Within the last year	( )
One to three years ago	( )
Four to six years ago	( )
Seven to nine years ago	( )
Over nine years	( )

Part C. Friendship Relationships

1. How many "close" friends have you had?

Do not know	( )
A few (one or two)	( )
Several	( )
Many	( )
None	( )

2. When was the last time you saw any of them?

Recently	( )
One to five years ago	( )
Over five years ago	( )

Part D. Residence in Houston

1. How long have you been in Houston, Texas?

One day to three months	( )
Four months to six months	( )
Six months to one year	( )
Over one year	( )

2. How many different places have you lived in Houston?

One through four	( )
Five through nine	( )
Ten - fourteen	( )
Over fourteen	( )

3. How long did you stay at your last residence?

One - two weeks	( )
Three - four weeks	( )
Five - six weeks	( )
Over six weeks	( )

Part E. Work History

1. Do you have a "regular" trade or occupation?

Yes	( )
No	( )

2. When was the last time you worked at it?

Within the last six months	( )
Six months to a year ago	( )
Over one year ago	( )

3. What is the highest rate of pay you ever made?

Under $3.00 per hour	( )
$3.00 to $5.00 per hour	( )
Over $5.00 per hour	( )

4. When did you last work at any kind of job?

Within the last month	( )
Between two and six months	( )
Over six months	( )

5. How much were you paid?

$1.60 per hour or less	( )
Over $1.60 per hour	( )

Part F. Labor Pool Work Experience

1. Have you ever worked out of a Labor Pool in Houston?

Yes	( )
No	( )

2. Did they pay you as promised?

Yes	( )
No	( )

3. Where did you cash your Labor Pool check?

Bar	( )
Elsewhere	( )

4. How many Labor Pools have you worked for in Houston?

One	( )
Two	( )
Three	( )
Four or more	( )

5. Have you worked at other odd jobs in this area?

Yes	( )
No	( )

6. What was the highest rate these jobs paid you?

$1.60 per hour or less	( )
Over $1.60 per hour	( )

7. Did you have any trouble getting your money?

Yes	( )
No	( )

Part G. Donation of Blood

1. How many times have you sold blood within the last twelve months?

One or two	( )
Three or four	( )
Over four	( )
None	( )

2. How much were you paid a pint?

Six dollars or less	( )
More than six dollars	( )

Part H. History of Arrest for Drinking

1. At what age were you first arrested?

17 years or under	( )
18 years to 21 years	( )
22 years to 25 years	( )
Over 25 years of age	( )

2. How many times have you been arrested for drinking in the last twelve months?

One to three times	( )
Four to seven times	( )
Over seven times	( )

3. When was the last time?

Within the last 30 days	( )
Over 30 days ago	( )

4. Longest jail sentence for drinking within the last twelve months?

One to four days	( )
Five to ten days	( )
Over ten days	( )

5. How many times have you gone to the "Pea Farm?"

One to three times	( )
Four to six times	( )
Over six times	( )
Never	( )

6. Have you been made a "Trustee" at the Houston Jail within the last twelve months?

Yes	( )
No	( )

Part I. History of Drinking

1. How old were you when you began to drink?

Ten to fourteen years	( )
Fifteen to nineteen years	( )
Twenty to twenty-four years	( )
Over twenty-four years	( )

2. How old were you when you experienced your first "blackout?"

Sixteen to seventeen years	( )
Eighteen to twenty-one years	( )
Twenty-two to twenty-seven years	( )
Twenty-eight or over	( )
Never had "blackouts"	( )

3. At what age did you start to drink in the morning?

Under twenty years	( )
Twenty to thirty years	( )
Thirty-one to forty years	( )
Over forty years	( )

4. At what age were you first fired for drinking?

Under twenty-one years	( )
Twenty-one to twenty-five years	( )
Twenty-six to thirty years	( )
Over thirty years	( )
Never	( )

5. At what age did you start to drink wine steadily?

Between 18 and 29 years of age	( )
Between 30 and 39 years of age	( )
Between 40 and 50 years of age	( )
Over 50 years of age	( )
Never	( )

6. Have you ever drank any nonbeverage alcohol?

Yes	( )
No	( )

7. When was the last time?

Within the last 6 months ( )
Over six months ( )

Part J. Descriptive Items of Treatment History

1. Have you ever been "committed" for drinking?

Yes ( )
No ( )

2. Have you ever contacted Alcoholics Anonymous?

Yes ( )
No ( )

3. Have you gone to a hospital or a "drying out" place in the last year?

Yes ( )
No ( )

4. Have you stayed at a "Mission" in Houston, Texas within the last 12 months?

Yes ( )
No ( )

5. Have you stayed at the "Sallie" in Houston, Texas within the last 12 months?

Yes ( )
No ( )

6. What is the longest you have stayed sober in recent years?

One through 14 days ( )
Fifteen through thirty-one days ( )
Two to six months ( )
Over six months ( )

Part K. Church Affiliation

1. What church did you belong to as a child?

Protestant	( )
Catholic	( )
None	( )

2. What church do you belong to now?

None	( )
Different than as a child	( )
Same as when a child	( )

Are you a veteran? Yes ( ) No ( )

TABLE VI

100 ALCOHOLICS LIVING ON SKID ROW IN HOUSTON, TEXAS BY SEVEN ITEMS DESCRIPTIVE OF MARITAL RELATIONSHIP

Marital Items	Number	Per cent
Age when first married		
Under 21	33	33.0
21-25	47	47.0
26-30	8	8.0
over 30	4	4.0
Never married	8	8.0
Total	92	100.0
Mean Age		
Number of times married		
One time	40	44.0
Two times	27	29.0
Three times	20	22.0
Four times and over	5	5.0
Total	92	100.0
Mean times		
Number of children from 92 marriages		
One	15	20.0
Two	31	42.0
Three	19	25.0
Four	5	7.0
More than four	4	6.0
Total	74	100.0
Mean Number		

Marital Items	Number	Per cent
Length of first marriage		
Two years or less	24	26.0
Four years or less	21	23.0
Over four years	39	42.0
Still married	8	9.0
Total	92	100.0
Mean Length		
Presently married		
Yes	18	19.0
No	65	71.0
Unknown	9	10.0
Total	92	100.0
Time when saw children last		
Within last year	18	24.0
1 - 3 years ago	26	35.0
4 - 6 years ago	15	20.0
7 - 9 years	3	10.0
Over 9 years	8	11.0
Total	74	100.0
Mean Years		

APPENDIX C

FRIENDSHIPS

TABLE VII

100 ALCOHOLICS LIVING ON SKID ROW IN HOUSTON, TEXAS
BY TWO ITEMS DESCRIPTIVE OF CLOSE FRIENDS

Friendship	Number	Per cent
Number of close friends		
Do not know	9	9.0
A few (one or two)	11	11.0
Several	24	24.0
Many	14	14.0
None	42	42.0
Total	100	100.0
Last time friends seen		
Recently	21	43.0
One to five years ago	10	20.0
Over five years ago	18	37.0
Total	49[a]	100.0

[a] 51 of the interviewed alcoholics either had no "close friends" or could not say whether or not they had any close friends.

APPENDIX D

HOUSTON RESIDENCE

TABLE VIII

100 ALCOHOLICS INTERVIEWED ON SKID ROW IN HOUSTON, TEXAS BY THREE ITEMS DESCRIPTIVE OF HOUSTON RESIDENCE

Residence Descriptive Items	Number	Per Cent
Length of time in Houston, Texas		
One day - three months	17	17.0
Four months - six months	26	26.0
Six months - one year	31	31.0
Over one year	36	36.0
Total	100	100.0
Time spent at last residence		
One - two weeks	43	43.0
Three - four weeks	21	21.0
Five - six weeks	22	22.0
Over six weeks	14	14.0
Total	100	100.0
Different places lived in Houston		
One - four	36	36.0
Five - nine	32	32.0
Ten - fourteen	17	17.0
Over fourteen	15	15.0
Total	100	100.0

TABLE IX

100 ALCOHOLICS KNOWN TO SKID ROW IN HOUSTON, TEXAS BY FIVE ITEMS DESCRIPTIVE OF WORK HISTORY

Work History	Number	Per cent
Regular trade or occupation		
Yes	81	81.0
No	19	19.0
Total	100	100.0
Highest rate of pay ever made		
Under $3.00 per hour	6	6.0
3-5 dollars per hour	71	71.0
Over $5.00 per hour	23	23.0
Total	100	100.0
Last time worked at this		
Within last 6 months	21	26.0
6 months to a year ago	18	22.0
Over one year ago	42	52.0
Total	81[a]	100.0
Most recent employment		
Within the last month	38	38.0
Between 2 - 6 months	44	44.0
Over six months	18	18.0
Total	100	100.0
Amount paid per hour		
$1.60 per hour or less	69	69.0
Over $1.60 per hour	31	31.0
Total	100	100.0
Average		

[a] 19 males comprising the study sample had no regular trade or occupation and were not included in this total.

APPENDIX F

BLOOD DONATION

TABLE X

100 ALCOHOLICS INTERVIEWED ON SKID ROW IN HOUSTON, TEXAS BY TWO ITEMS DESCRIPTIVE OF THE DONATION OF BLOOD

Items Describing Donation of Blood	Number	Per Cent
Times sold blood in last 12 months		
One or two times	33	33.0
Three or four times	24	24.0
Over four	13	13.0
None	30	30.0
Total	100	100.0
How much were you paid a pint?		
Six dollars or less	47	68.0
More than six dollars	23	32.0
Total	70[a]	100.00

[a] 30 males comprising the study sample had not donated blood in the last 12 months and were not included in this total.

APPENDIX G

CHURCH AFFILIATION

TABLE XI

100 ALCOHOLICS INTERVIEWED ON SKID ROW IN HOUSTON, TEXAS BY TWO ITEMS DESCRIPTIVE OF CHURCH AFFILIATION

Items Describing Church Affiliation	Number	Per Cent
What church did you belong to as a child?		
Protestant	74	74.0
Catholic	20	20.0
None	6	6.0
Total	100	100.0
What church do you belong to now?		
None	65	65.0
Different than as a child	9	9.0
Same as when a child	26	26.0
Total	100	100.0

TABLE XII

A FOUR STUDY COMPARISON OF THE DEMOGRAPHIC CHARACTERISTICS OF SKID ROW ALCOHOLICS

Characteristics of "average" skid row alcoholic in study	Straus[a] (New Haven)	Katz[b] (San Francisco)	Docter[c] (Los Angeles)	Ross (Houston)
Age at interview	45.0	45.0	43.4	41.2
Race	Caucasian	Caucasian	Caucasian	Caucasian
Education (highest grade)	8.0	12.0	12.0	10.2
Marital status	Single	Divorced	Divorced	Divorced
Previous year's earnings	Under $500	$900	Under $3600	Under $1500
Religion	Protestant	Protestant	Protestant	Protes-tant
Arrest pattern	Frequent	Frequent	Frequent	Frequent
Age at start of heavy drinking	Under 24	Under 35	Under 28	Under 25
Sought medical help for drinking	Yes	Yes	Yes	Yes
Daily drink at time of interview	Wine	Wine	Wine	Wine
Sought help from Salvation Army	Yes	Yes	Yes	Yes
Sought help from other sources	Yes	Yes	Yes	Yes

[a]Straus, Robert, "Alcohol and the Homeless Man," Quarterly Journal of Studies on Alcohol, Vol. 7, No. 4 (December 1946), 360-404.

[b]Katz, Lawrence, "Salvation Army Men's Social Service Center," Quarterly Journal of Studies on Alcohol, Vol. 27, No. 4 (December 1966), 636-647.

[c]Docter, Richard F., "Drinking Practices of Skid Row Alcoholics," Quarterly Journal of Studies on Alcohol, Vol. 27, No. 4 (December 1967), 700-708.

VITA

The author was born in Columbus, Ohio on January 22, 1926. He was educated in the public schools of Houston, Texas and after graduation in 1944 joined the United States Army. After serving honorably for twenty-six months he was discharged and in 1946 entered the University of Houston as an undergraduate. In 1949, after successfully completing the pre-law requirements at that institution, he entered Law School at the South Texas College of Law. In 1952 he became an insurance investigator for a national casualty company and he pursued that occupation, working both for large companies and as an independent claims representative, until 1963 at which time he was employed as a counselor by the Texas Commission on Alcoholism and assigned to the northern units of the Texas Department of Corrections. In 1965 he returned to college full-time, enrolling at Sam Houston State College where he majored in Sociology and minored in history and psychology. He received a Bachelor of Science degree from that institution in May of 1967. He is a member of Alpha Kappa Delta National Sociology Honor Society. At the present time Mr. Ross is employed as a Supervisor for the Texas Department of Public Welfare in Houston, Texas.